CLINICAL KINESIOLOGY

VOL V: MUSCLES OF THE LOWER EXTREMITIES

CALF AND FOOT

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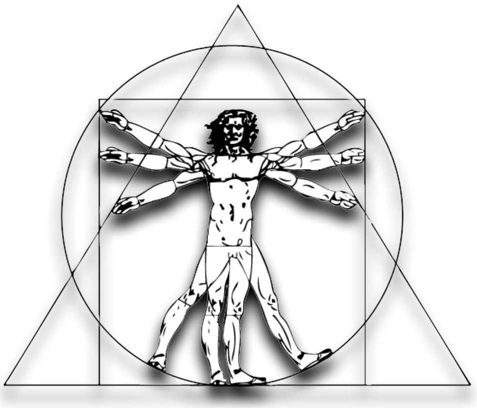

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DEDICATION

by the late Dr. Alan Beardall

To Kinesiologists world wide, who are seeking a holistic approach to health by observing and measuring the performances of the human body.

ACKNOWLEDGEMENTS

No book on Kinesiology would be complete without giving tribute to the founder, developer and researcher of Applied Kinesiology, Dr. George Goodheart of Detroit, Michigan.

A special thanks to our artist, Jerry Upchurch, who has made every effort to make this a special book. His excellent graphics are especially appreciated.

Special appreciation is given to my assistant, Cristin Gilbert, for her assistance, encouragement and dedication to Clinical Kinesiology.

Dana Van Skiver is responsible for editing and manual preparation. Her unusual approach, dedication and loyalty have brought a special uniqueness to this fifth volume.

Cinde Gordon is responsible for the paste-ups and point identification. Her special touch is appreciated.

INTRODUCTION

This is the fifth in a series of workbooks to be published under the Clinical Kinesiology title. This manual contains all the muscles of the lower extremities from the knee to the toes, 52 muscles inclusive.

Each muscle presented will contain the following data:

1) A picture of the muscle itself with written identification of the origin and insertion.
2) A picture of the muscle test. This includes angles or degrees, when indicated, as well as points of bracing and contact. Bracing areas are identified by a box with a white arrow. Contact points are identified by a box with a black arrow. White arrows demonstrate the direction the patient moves for a proper test; the black arrow indicates the direction of force the doctor applies for the muscle test.
3) Written description of the location as well as visual pictures of the following reflexes: neurovascular, neurolymphatic, two visceral organ reflexes and the muscle acupuncture point.
4) A description of the muscle action.
5) The vertebral level (V.L.) which is the most common subluxation seen in the spinal column when the respective muscle is aberrant.
6) The Lovett Brother Vertbral Level (L.B.V.L) is the vertebrae at the opposite end of the spin that moves synchronistically with the V.L. and may also be subluxated.
7) The myomere (M.M.), which is the location on the spinal column of the most direct nerve route to the muscle.
8) The related cranial and foot subluxations most commonly seen in clinical practice.
9) The specific nutrient and recommended nutrient sources related to each muscle.

This manual is divided into four chapters, as follows:

CHAPTER I: KINESIOLOGICAL TESTING AND EXAMINATION PROCEDURE
CHAPTER II: EXTRINSIC MUSCLES OF THE FOOT
    Section I: Calf and Ankle
    Section II: Big Toe
    Section III: Toes
CHAPTER III: INTRINSIC MUSCLES OF THE FOOT
    Section I: Big Toe
    Section II: Toes
CHAPTER IV: REFERENCES
    A. Organ-Muscle Relationships
    B. Vertebral Level-Muscle Relationships
    C. Cranial Bone-Muscle Relationships
    D. Foot Bone-Muscle Relationships
    E. Muscle-Organ Relationships

F. Alphabetical Index of Muscles

The following books have been published by Clinical. Kinesiology:

Volume I: Muscles of the Low Back and Abdomen
Volume II: Muscles of the Pelvis and Thigh
Volume III: Muscles of the TMJ, Hyoid and Cervicals, Including Cranial Manipulation
Volume IV: Muscles of the Upper Extremities; Shoulder, Forearm and Hand
Volume V: Muscles of the Lower Extremities; Calf and Foot
Clinical Kinesiology Instruction Manual: Including Introduction to Hand Modes
Biocomputer Hand Modes Manual
Clinical Kinesiology Travel Manual

It should be clearly understood that this text is not intended to replace the excellent research and manuals of Dr. George Goodheart, nor those texts produced by Dr. David Walther. The author encourages you to avail yourself of these texts. The opinions, ideas and concepts expressed in this manual do not necessarily reflect current medical opinion. They are the result of independent research obtained through clinical practice.

TABLE OF CONTENTS

CHAPTER I KINESIOLOGICAL TESTING AND EXAMINATION PROCEDURE

Kinesiological Testing and Examination Procedure 2
Group I Muscles of the Knee and Ankle 5
Group II Muscles of the Arch 6
Group III Muscles of the Big Toe 8
Group IV Muscles of the Second Toe 10
Group V Muscles of the Third Toe 11
Group VI Muscles of the Fourth Toe 13
Group VII Muscles of the Fifth Toe 14

CHAPTER II EXTRINSIC MUSCLES OF THE FOOT

Using the Clinical Kinesiology Workbooks 18
Origin and Insertion Charts 22

SECTION I: CALF AND ANKLE

870 POPLITEUS 28
872 GASTROCNEMIUS, Medial Head 30
874 GASTROCNEMIUS, Lateral Head 32
876 PLANTARIS 34
878 SOLEUS, Medial Head 36
880 SOLEUS, Lateral Head 38
882 TIBIALIS POSTERIOR, Tibial Division 40
884 TIBIALIS POSTERIOR, Fibular Division 42
886 PERONEUS LONGUS, Cuneiform Division 44
888 PERONEUS LONGUS, Metatarsal Division 46
890 PERONEUS BREVIS, Fibular Division 48
892 PERONEUS BREVIS, Septal Division 50
894 PERONEUS TERTIUS 52
896 TIBIALIS ANTERIOR, Supinator Division 54
898 TIBIALIS ANTERIOR, Dorsiflexor Division 56

SECTION II: BIG TOE

900 FLEXOR HALLUCIS LONGUS, Tibial Division 60
902 FLEXOR HALLUCIS LONGUS, Fibular Division 62
904 EXTENSOR HALLUCIS LONGUS, Interosseous Division 64
906 EXTENSOR HALLUCIS LONGUS, Fibular Division 66

SECTION III: TOES

908 FLEXOR DIGITORUM LONGUS, Medial Division 70
910 FLEXOR DIGITORUM LONGUS, Lateral Division 72
912 EXTENSOR DIGITORUM LONGUS, Medial Division 74

914 EXTENSOR DIGITORUM LONGUS, Lateral Division 76

CHAPTER III INTRINSIC MUSCLES OF THE FOOT

Origin and Insertion Charts 80

SECTION I: BIG TOE

920 ADDUCTOR HALLUCIS, SUPERIOR DIVISION
(Abductor Hallucis, Superior Division) 84
922 ADDUCTOR HALLUCIS, INFERIOR DIVISION
(Abductor Hallucis, Inferior Division) 86
924 FLEXOR HALLUCIS BREVIS, First Cuneiform Division 88
926 FLEXOR HALLUCIS BREVIS, Tendonal Division 90
928 FLEXOR HALLUCIS BREVIS, Third Cuneiform Division 92
930 FLEXOR HALLUCIS BREVIS, Cuboid Division 94
932 ABDUCTOR HALLUCIS OBLIQUE HEAD, Peroneus Division
(Adductor Hallucis Oblique Head, Peroneus Division) 96
934 ABDUCTOR HALLUCIS OBLIQUE HEAD, Metatarsal Division
(Adductor Hallucis Oblique Head, Metatarsal Division) 98
936 ABDUCTOR HALLUCIS TRANSVERSE HEAD, Medial Division
(Adductor Hallucis Transverse Head, Medial Division) 100
938 ABDUCTOR HALLUCIS TRANSVERSE HEAD, Lateral Division
(Adductor Hallucis Transverse Head, Lateral Division) 102
940 EXTENSOR HALLUCIS BREVIS 104

SECTION II: TOES

942 QUADRATUS PLANTAE, Medial Division 108
944 QUADRATUS PLANTAE, Lateral Division 110
946 FLEXOR DIGITORUM BREVIS, Medial Division 112
948 FLEXOR DIGITORUM BREVIS, Lateral Division 114
950 FLEXOR DIGITUS PEDIS, SECOND
(Lumbricales Pedis, First Division) 116
952 FLEXOR DIGITUS PEDIS, THIRD
(Lumbricales Pedis, Second Division) 118
954 FLEXOR DIGITUS PEDIS, FOURTH
(Lumbricales Pedis, Third Division) 120
956 FLEXOR DIGITUS PEDIS, FIFTH
(Lumbricales Pedis, Fourth Division) 122
958 ADDUCTOR DIGITUS PEDIS, SECOND
(Interossei Dorsales Pedis, First Division) 124
960 ADDUCTOR DIGITUS PEDIS, THIRD
(Interossei Plantares, First Division) 126
962 ADDUCTOR DIGITUS PEDIS, FOURTH
(Interossei Plantares, Second Division) 128
964 ADDUCTOR DIGITUS PEDIS, FIFTH
(Interossei Plantares, Third Division) 130

966 ABDUCTOR DIGITUS PEDIS, SECOND
(Interossei Dorsales Pedis, Second Division) 132
968 ABDUCTOR DIGITUS PEDIS, THIRD
(Interossei Dorsales Pedis, Third Division) 134
970 ABDUCTOR DIGITUS PEDIS, FOURTH
(Interossei Dorsales Pedis, Fourth Division) 136
972 ABDUCTOR DIGITUS PEDIS, FIFTH
(Flexor Digiti Quinti Brevis) 138
974 ABDUCTOR DIGITUS MINIM PEDIS 140
976 EXTENSOR DIGITORUM BREVIS 142

CHAPTER IV REFERENCES
Organ - Muscle Relationships 146
Vertebral Level - Muscle Relationships 167
Cranial Bone - Muscle Relationships 168
Foot Bone - Muscle Relationships 169
Muscle - Organ Relationships 170
Alphabetical Index of Muscle 182

BIBLIOGRAPHY 188

GLOSSARY OF ABBREVIATIONS 189

CHAPTER I

KINESIOLOGICAL TESTING AND EXAMINATION PROCEDURE

This chapter of the book deals with muscle testing. This has become an important part of the Chiropractic examination. The information given is invaluable in evaluating the musculoskeletal part of the patient's symptoms. Muscle tests should be performed with the understanding of the factors involved in good muscle testing. (See the Clinical. Kinesiology Instruction Manual, pages 46-47.)

There are fifty-two muscles of the lower extremity. In this chapter, they are divided into the following categories:

1. Muscles of the knee and ankle.
2. Muscles of the arch.
3. Muscles of the big toe.
4. Muscles of the toes:
    a) Muscles of the second toe.
    b) Muscles of the third toe.
    c) Muscles of the fourth toe.
    d) Muscles of the fifth toe.

The tests for these muscles are pictured and numbered in a sequence that might suggest the most efficient manner in which to test all 52 muscles.

The muscles of the calf and foot are divided into four divisions. The first division are muscles that insert on the calf (popliteus) or calcaneus. The second set are the muscles that insert on the arch of the foot or have an affect on the arch, like tibialis posterior. The third set are the muscles that insert on the big toe. These start with the extensors. The fourth set are the muscles of the toes. These start with the muscles of the second toe and end with the muscles of the fifth toe.

Although there are sixty-two individual muscle tests pictured, for practical purposes there are only fifty-two muscles discussed in the text. The reason for this is that muscles are divided based on kinesiological consideration (i.e., according to associated reflexes, cranial and foot bone subluxations, etc.).

It should be noted that the names and computer numbers of certain muscles have been changed. Please note the changes below:

MUSCLE #	NEW NAME	OLD NAME
920	Adductor Hallucis, Sup. Div.	Abductor Hallucis, Sup. Div.
922	Adductor Hallucis, Inf. Div.	Abductor Hallucis, Inf. Div.
932	Abductor Hallucis, Obl. Head Peroneus Div.	Adductor Hallucis, Obl. Head peroneus Div.
934	Abductor Hallucis, Obl. Head Metatarsal Div.	Adductor Hallucis, Obl. Head Metatarsal Div.
936	Abductor Hallucis Trans. Head, Medial Div.	Adductor Hallucis Trans. Head Medial Div.
938	Abductor Hallucis Trans. Head, Lateral Div.	Adductor Hallucis Trans. Head Lateral Div.
950	Flexor Digitus Pedis, Second	Lumbricales Pedis, First Div.
952	Flexor Digitus Pedis, Third	Lumbricales Pedis, Second Div.
954	Flexor Digitus Pedis, Fourth	Lumbricales Pedis, Third Div.

MUSCLE #	NEW NAME	OLD NAME
956	Flexor Digitus Pedis, Fifth	Lumbricales Pedis, Fourth Div.
958	Adductor Digitus Pedis, Second	Interossei Dorsales Pedis, First Div.
960	Adductor Digitus Pedis, Third	Interossei Plantares, First Div.
962	Adductor Digitus Pedis, Fourth	Interossei Plantares, Second Div.
964	Adductor Digitus Pedis, Fifth	Interossei Plantares, Third Div.
966	Abductor Digitus Pedis, Second	Interossei Dorsales Pedis, Second Div.
968	Abductor Digitus Pedis, Third	Interossei Dorsales Pedis, Third Div.
970	Abductor Digitus Pedis, Fourth	Interossei Dorsales Pedis, Fourth
972	Abductor Digitus Pedis, Fifth	Flexor Digitus Quinti Brevis

In the study of the muscles of lower extremities all textbooks have chosen to follow the idea that the second metatarsal is the mid-line of the foot. Therefore all muscles which pull toward the second metatarsal are called adductors and those which pull away are called abductors. In this text, we have chosen a more logical way of naming muscles. The action of the muscles of the extremities is described in the same manner as the rest of the body, with the exception of the muscles of the hands. That is, all action toward the mid-sagittal plane is called adduction and action away from the mid-sagittal plane is called abduction. Therefore, a muscle on the medial aspect of the arch of the foot which pulls the big toe toward the mid-sagittal plane is called an adductor, not an abductor.

The intrinsic muscles of the foot which pull the toes are named according to their action. For example, adductor digitus pedis, fourth, in the old texts is named interossei plantares the second. The new name describes what the action is first; what the muscle acts on (a digit), second; pedis for foot, third; the number which tells us what toe the muscle acts upon, fourth. Adductor digitus pedis, fourth is a muscle of the foot which has an adduction action on the fourth digit. The new muscle name tells us a complete story, while interossei plantares, second tells us very little. (It tells us it is between the toes and on the plantar surface and has something to do with second. This second turns out to be the second in a series of three.) The changes in the names of these muscles are practical, useful and more meaningful.

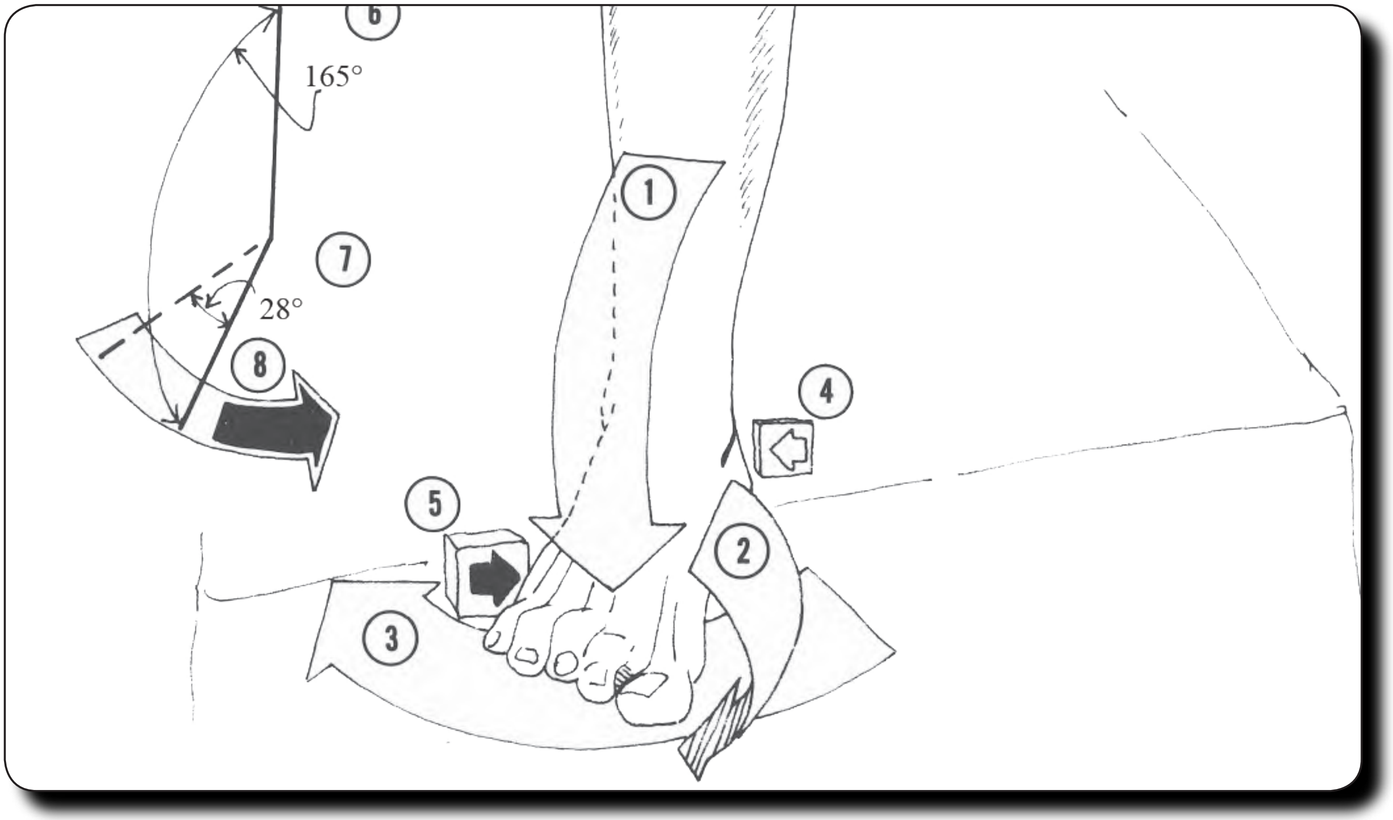
General Rules For Understanding Muscle Test Illustration

The muscle testing illustrations in this book are new and original. We have tried throughout each book to improve our methods of presentation. Most muscle testing illustrations include the following:

Clear White Arrows:	Indicate the positioning for testing of the muscle in question (M.T.P.).
Clear Arrows/Black Interior:	Represents the direction of the force of the testor once a contact has been accomplished.
Box with White Arraw:	Represents the area of contact with the body for bracing.
Box with Black Arrow:	Represents the area of contact for specific muscle test.
A Lined Drawing:	The solid line represents the neutral position, the dotted line represents the muscle testing position (M.T.P.).

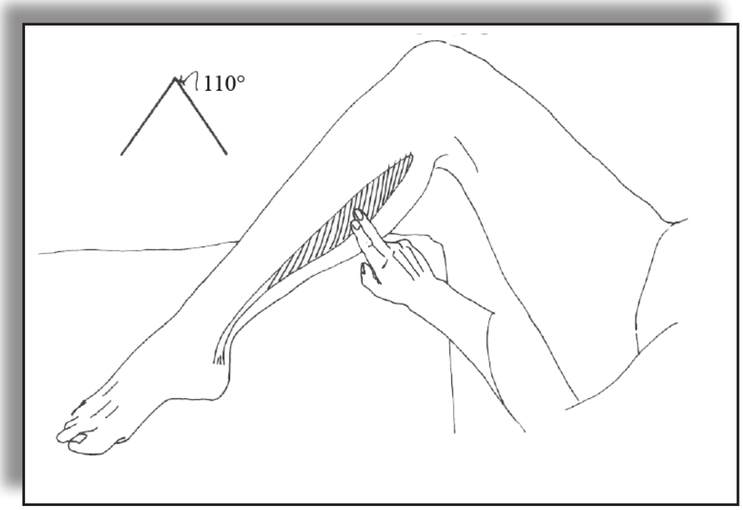
The muscle test shown below is that of Peroneus Longus, Cuneiform Division. This muscle is an extrinsic muscle of the foot and based on its origin and insertion it acts as a plantar flexor, abductor and everter. The white arrows (as seen in Figures 1, 2 and 3) depict the action of this muscle. Fig. 1 is plantar flexion, Fig. 2 is eversion and Fig. 3 is abduction. By noting these arrows in each illustation you can quickly visualize each muscle's action and therefore its muscle testing position (M.T.P.).

Fig. 1: Indicates plantar flexion.
Fig. 2: Indicates eversion.
Fig. 3: Indicates abduction.
Fig. 4: Represents the area of contact on the calcaneus.
Fig. 5: Represents the area of contact on the fifth metatarsal.
Fig. 6: Represents the degrees of plantar flexion represented also by the white arrow in Fig. 1.
Fig. 7: Represents the degrees of abduction as seen in Fig. 3.
Fig. 8: Represents the direction of the force of the muscle test across the body in a transverse plane.

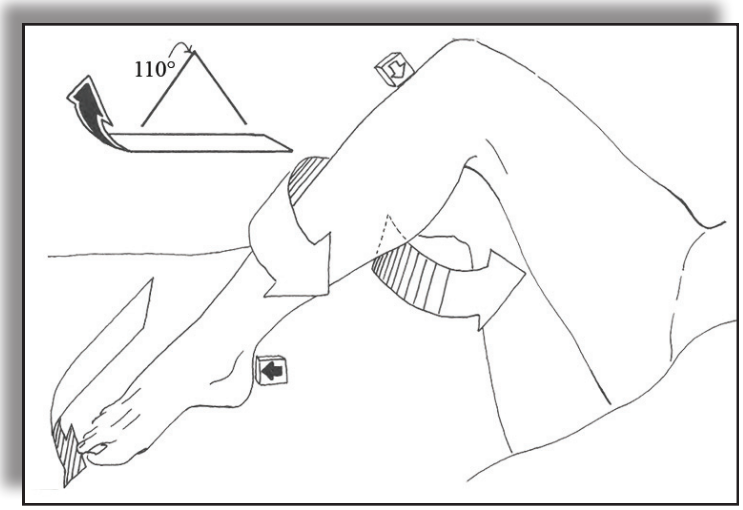


GROUP I

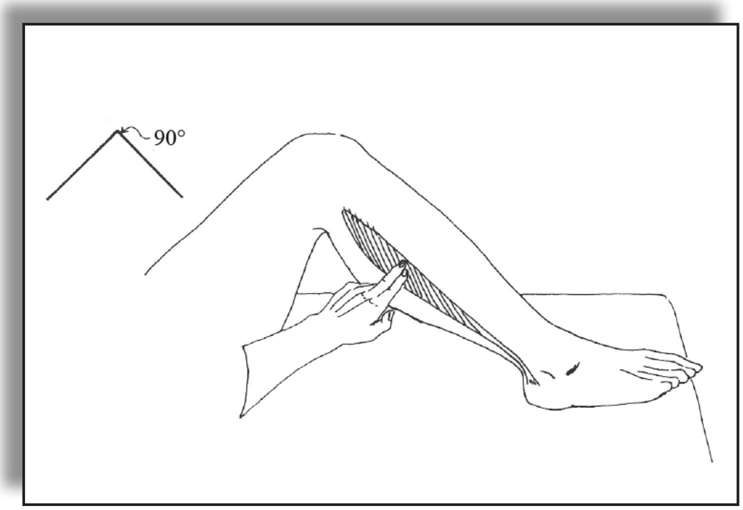
Muscle of the Knee and Ankle



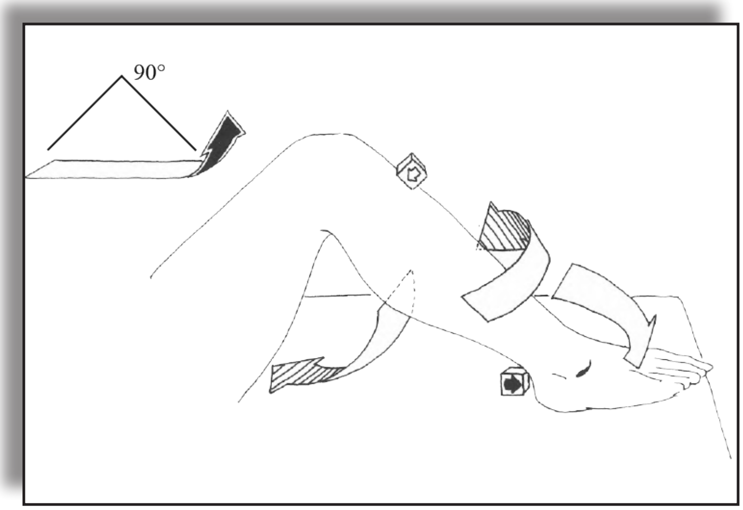
878 SOLEUS, Medial Head



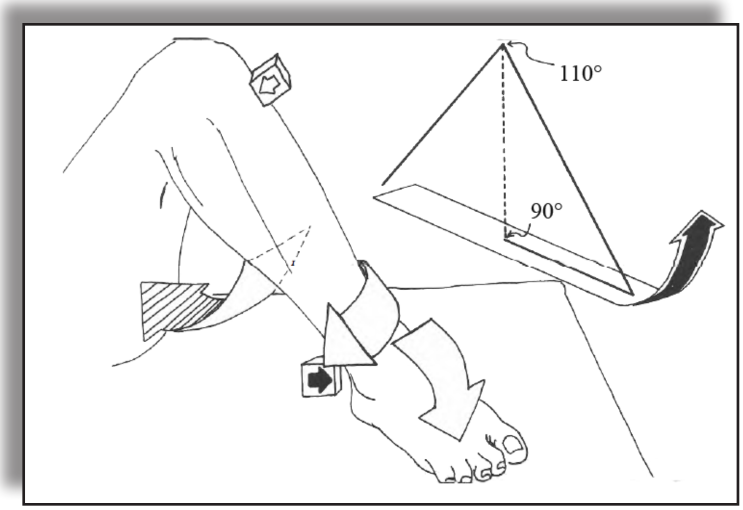
872 GASTROCNEMIUS, Medial Head



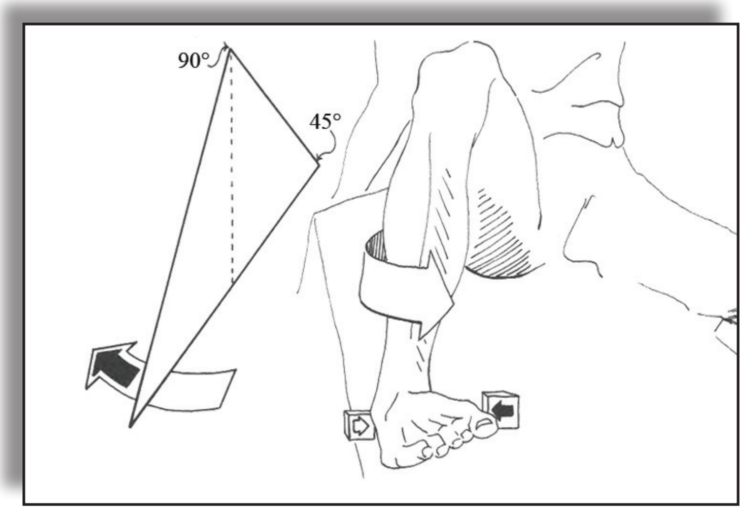
880 SOLEUS, Lateral Head



876 PLANTARIS



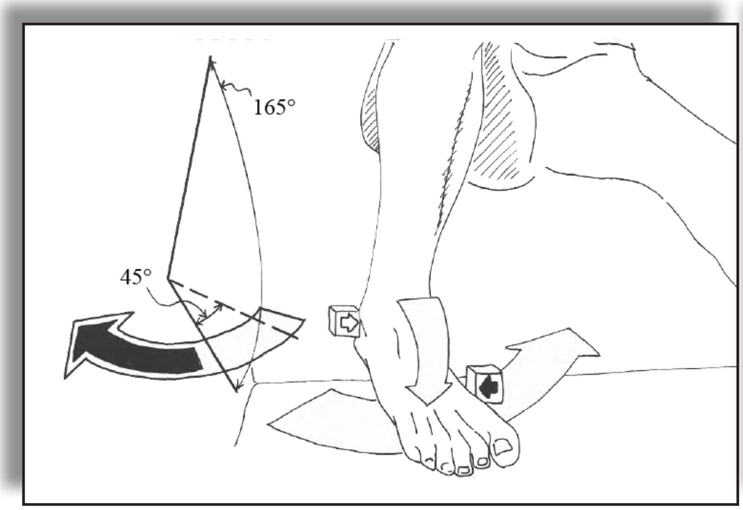
874 GASTROCNEMIUS, Lateral Head



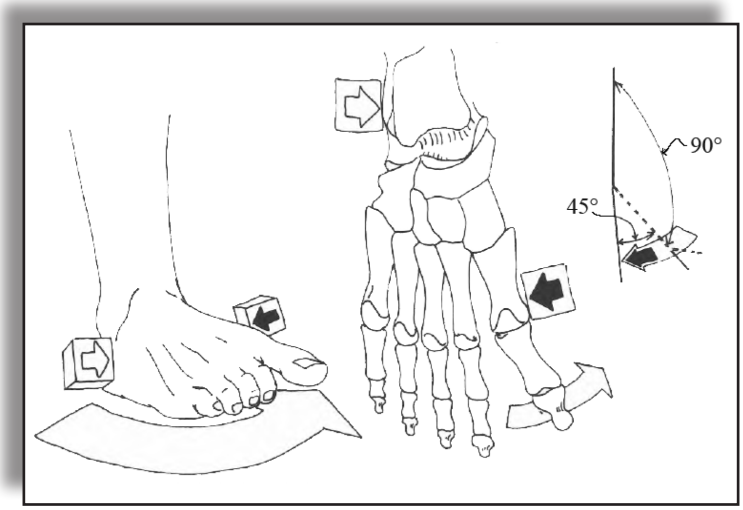
870 POPLITEUS

GROUP II

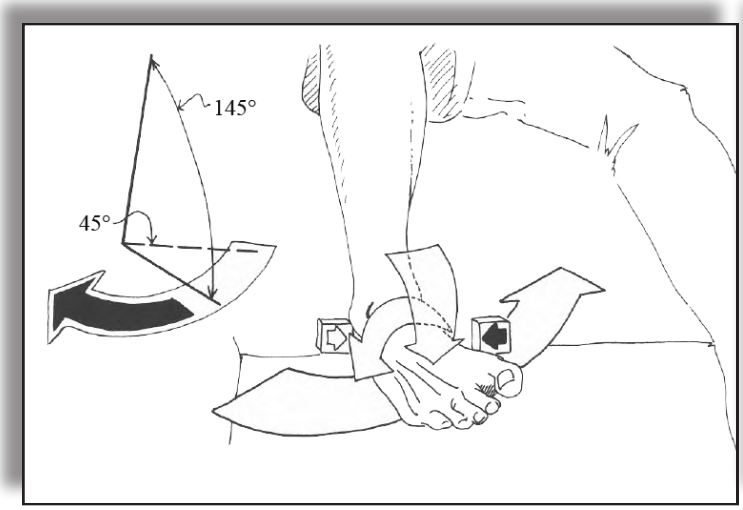
Muscle of the Arch



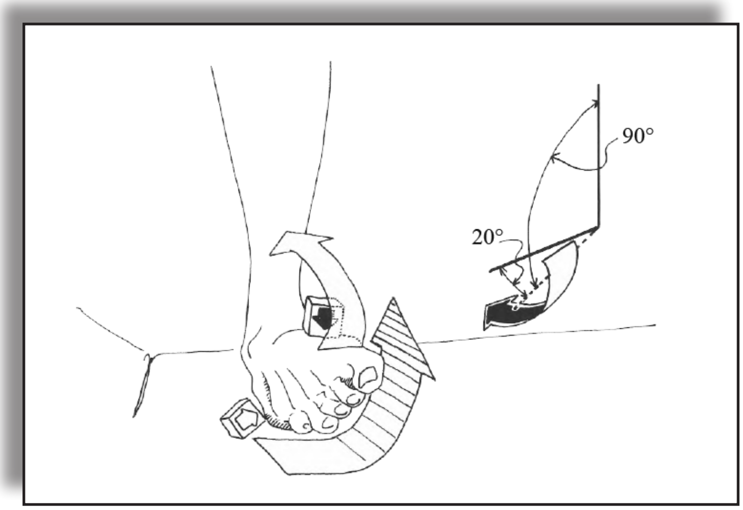
882 TIBIALIS POSTERIOR, Tibial Div.



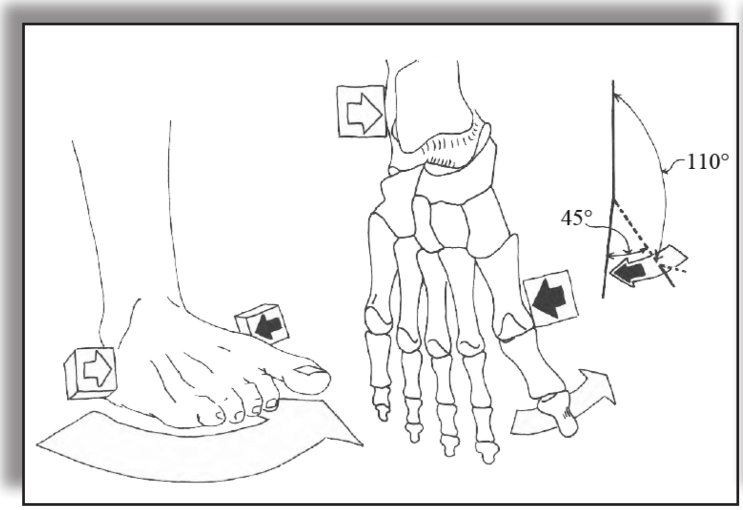
920 ADDUCTOR HALLUCIS, Superior. Div.



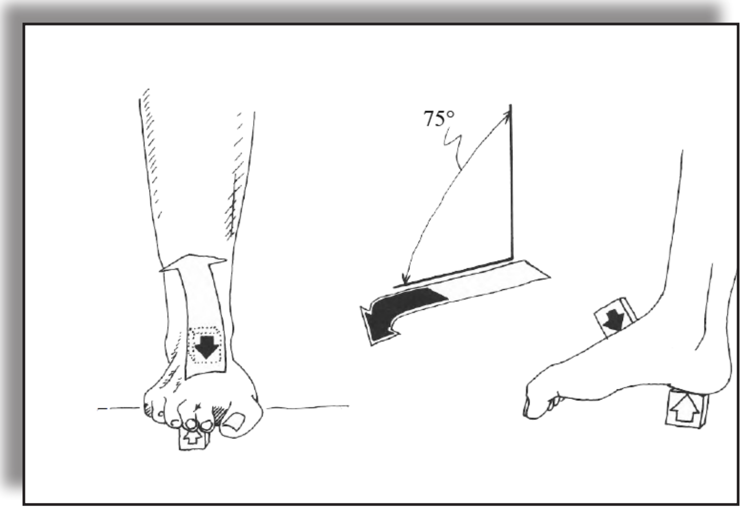
884 TIBIALIS POSTERIOR, Fibular Div.



896 TIBIALIS ANTERIOR, Supinator Div.



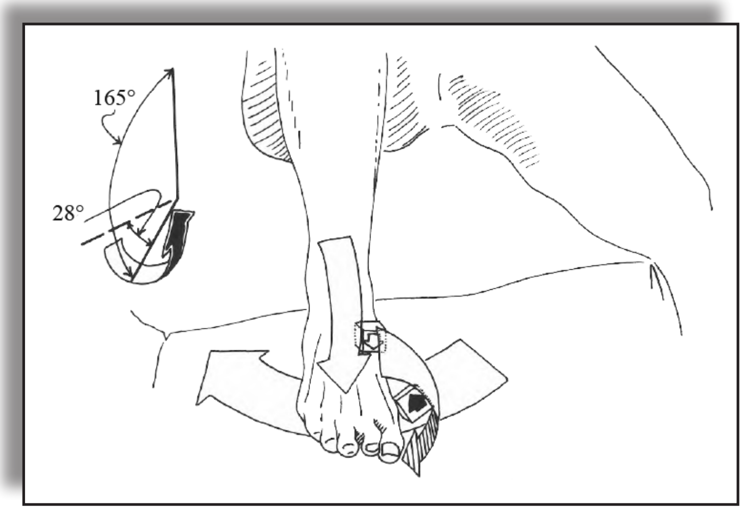
922 ADDUCTOR HALLUCIS, Inferior. Div.



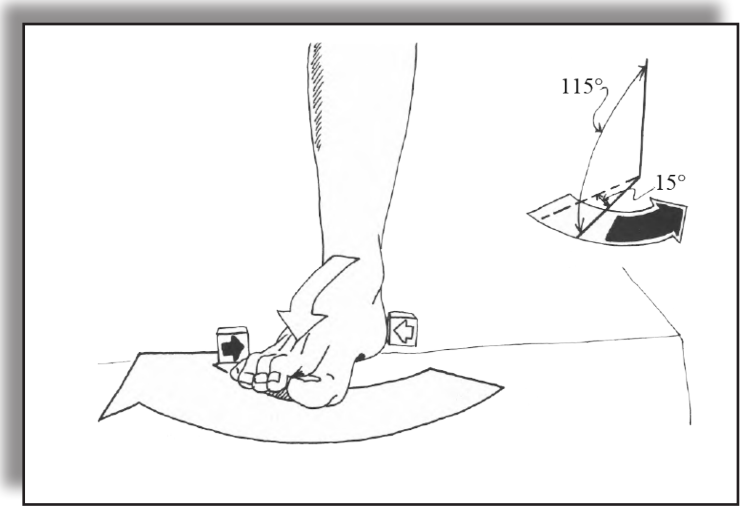
898 TIBIALIS ANTERIOR, Dorsiflexor Div.

Group II

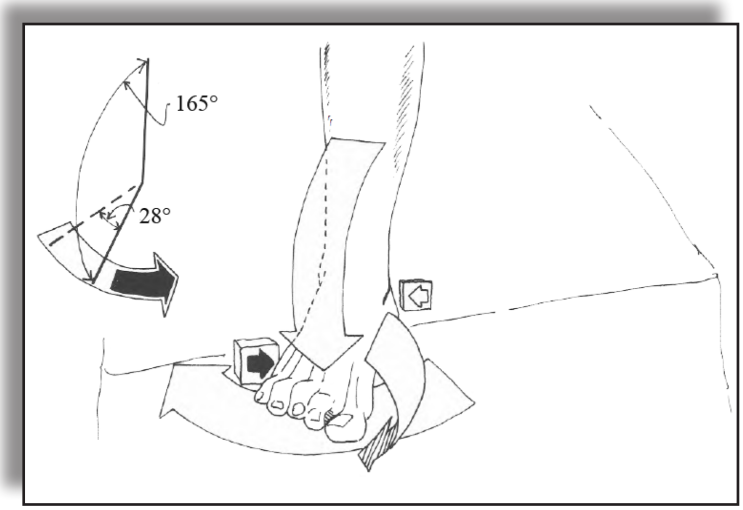
Muscle of the Arch



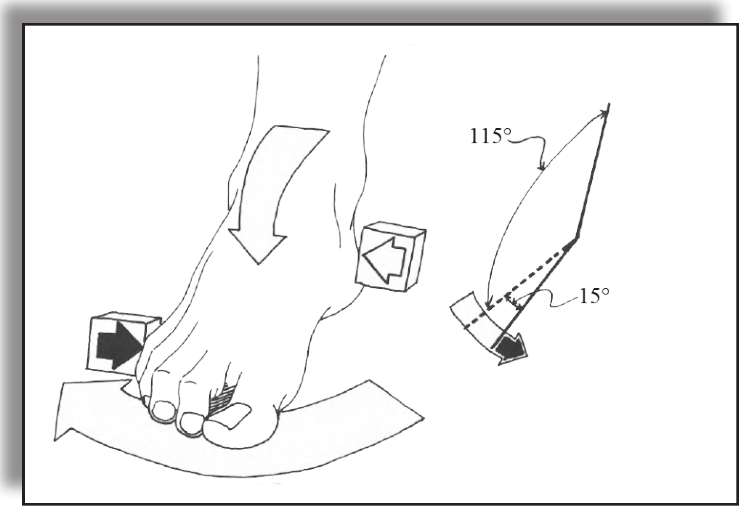
888 PERONEUS LONGUS, Metatarsal Div.



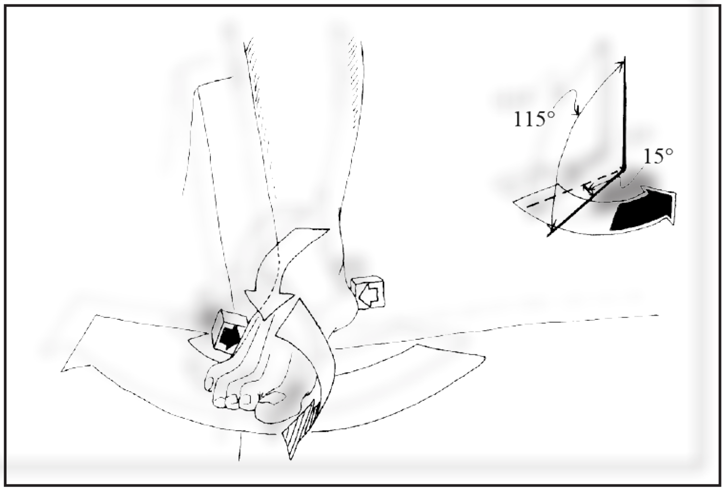
892 PERONEUS BREVIS, Septal Div.



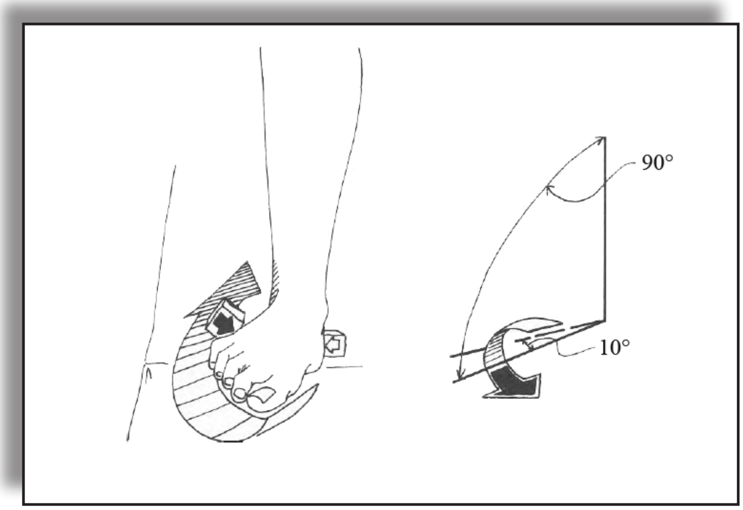
886 PERONEUS LONGUS, Cuneiform Div.



974 ABDUCTOR DIGITUS MINIMI PEDIS



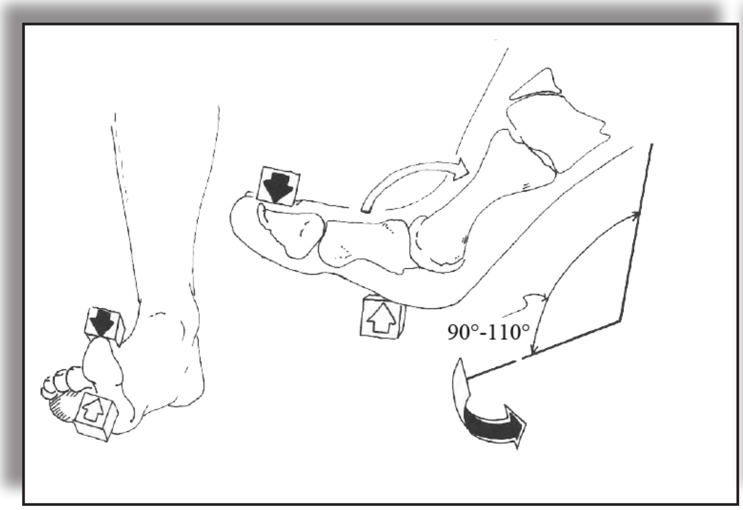
892 PERONEUS BREVIS, Fibular Div.



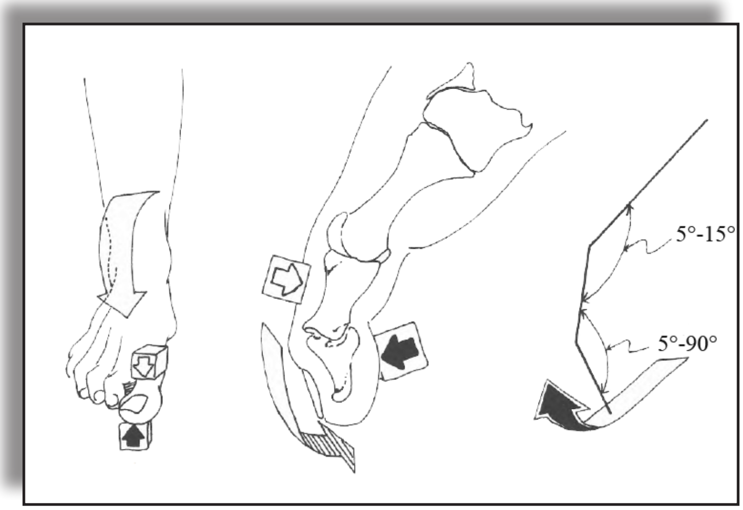
894 PERONEUS TERTIUS

GROUP III

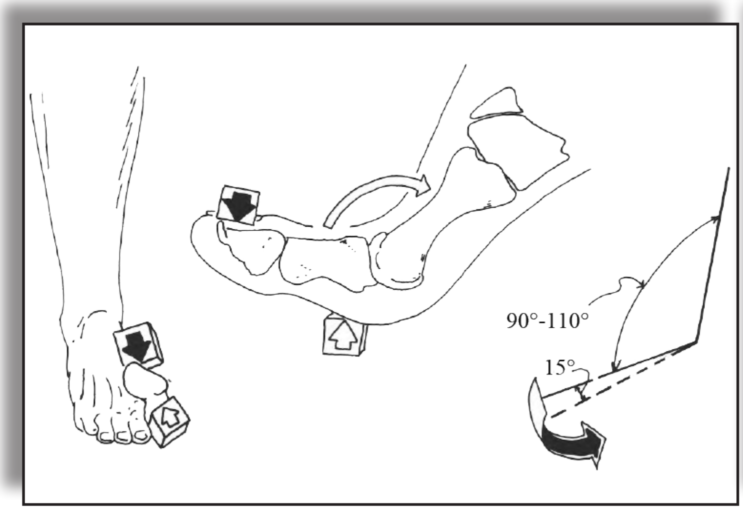
Muscles of the Big Toe



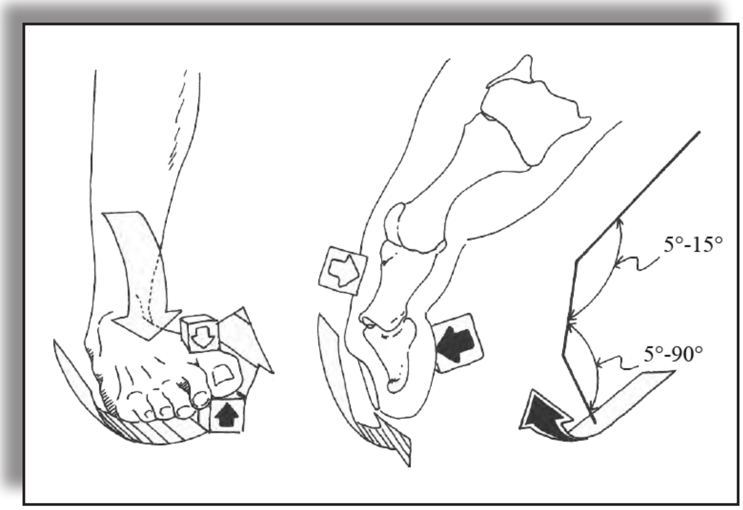
906 EXTENSOR HALLUCIS LONGUS, Fibular Div.



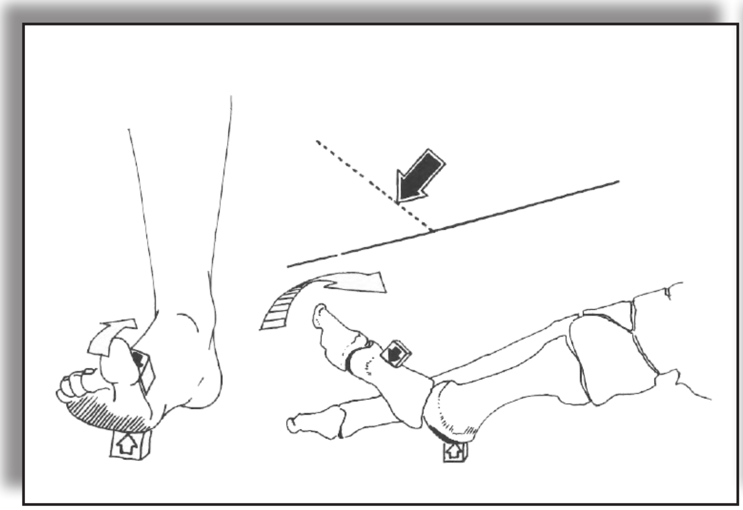
900 FLEXOR HALLUCIS LONGUS, Tibial Div.



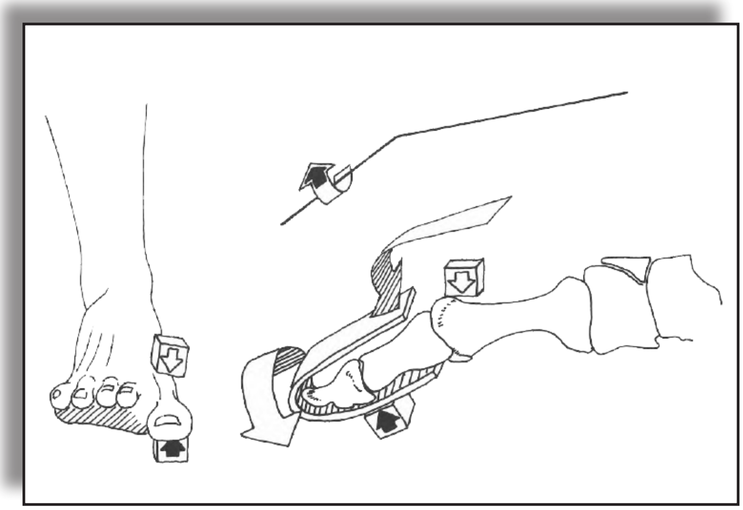
904 EXTENSOR HALLUCIS LONGUS, Inter. Div.



902 FLEXOR HALLUCIS LONGUS, Fibular Div.



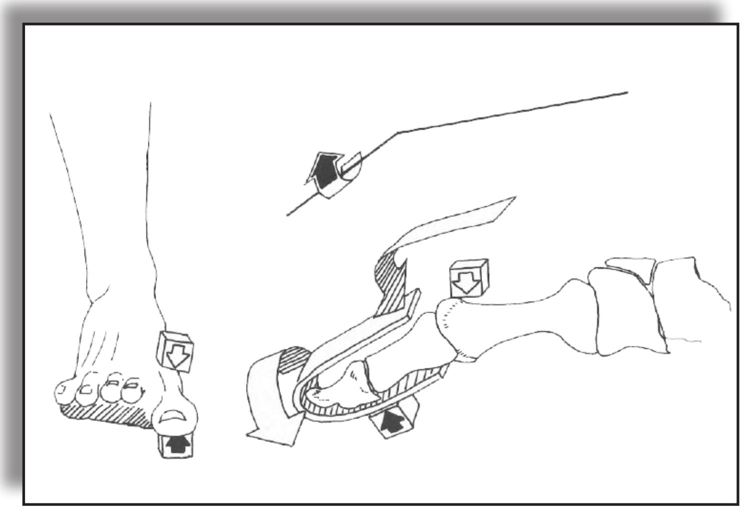
940 EXTENSOR HALLUCIS BREVIS



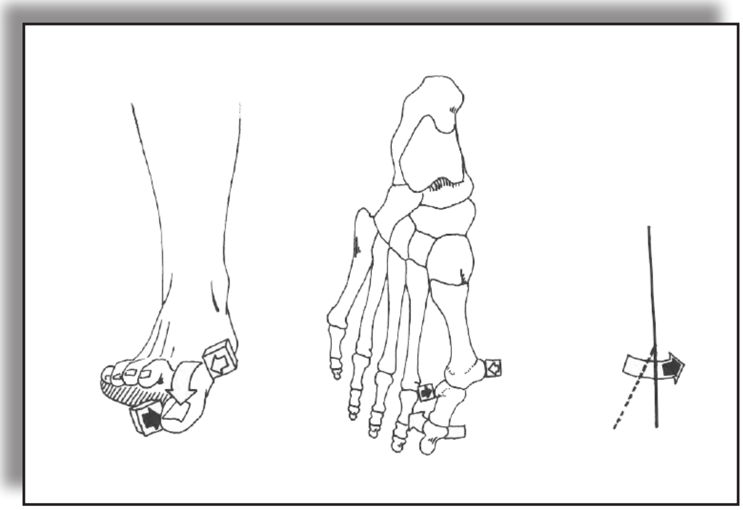
924 FLEXOR HALLUCIS BREVIS, First Cune. Div.

GROUP III

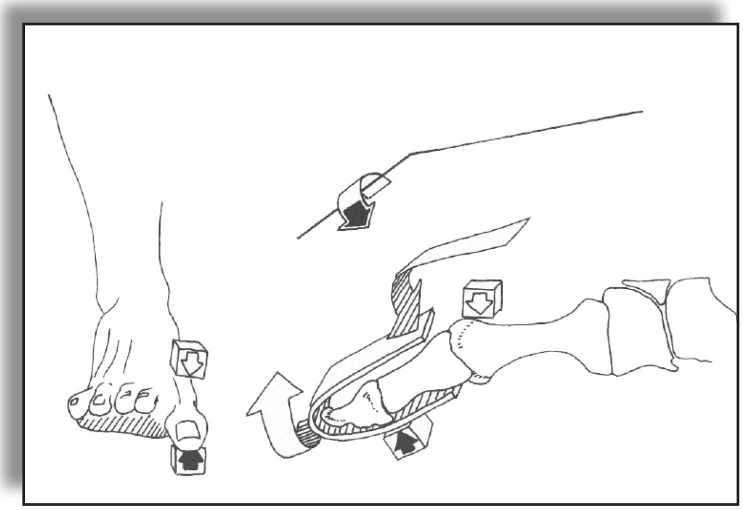
Muscles of the Big Toe



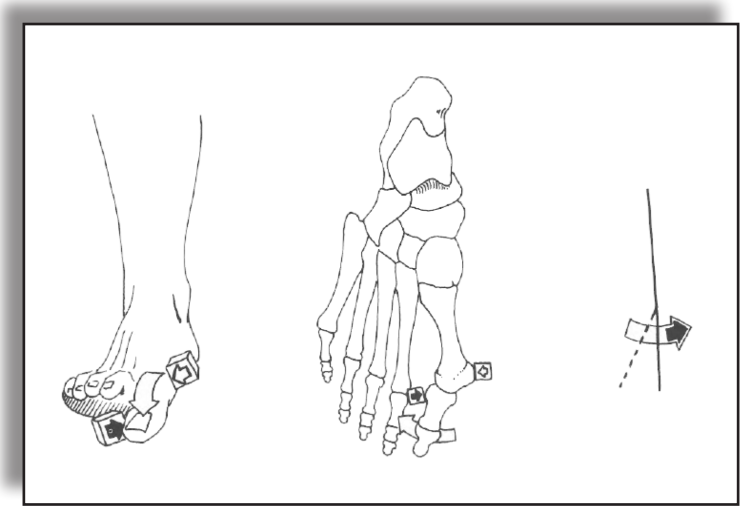
926 FLEXOR HALLUCIS BREVIS, Tendonal Div.



932 ABDUCTOR HALLUCIS OBL. HEAD, Peron. Div.



928 FLEXOR HALLUCIS BREVIS, 3rd Cuneiform Div.



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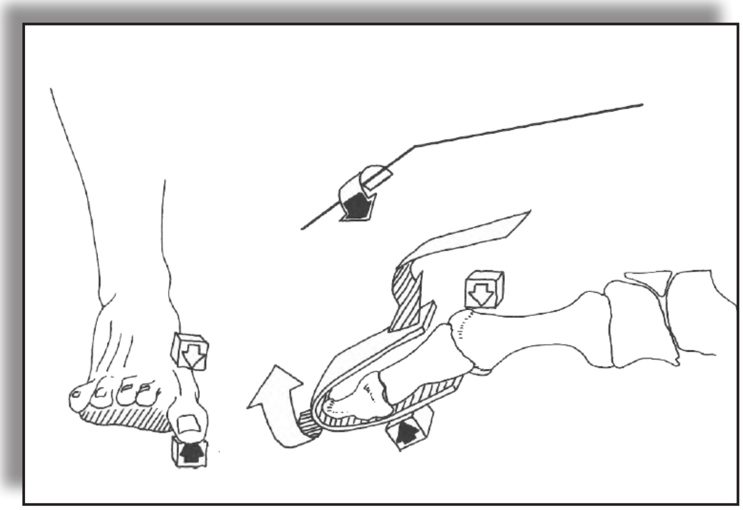
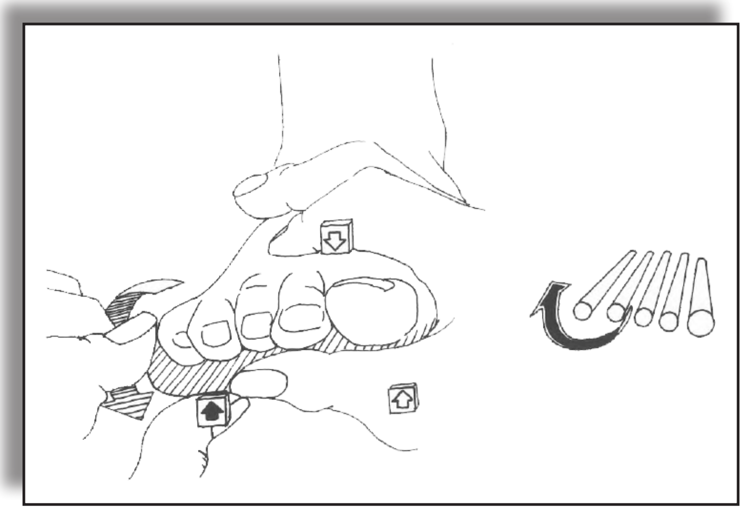
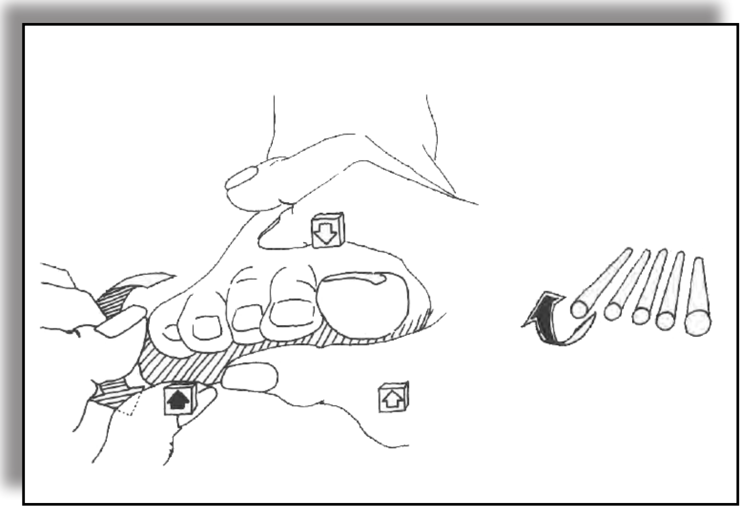


930 FLEXOR HALLUCIS BREIVS, Cuboid Div.



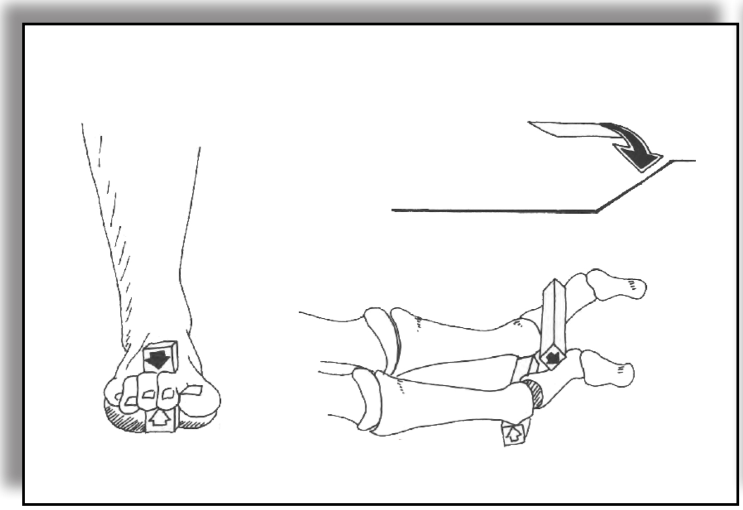
936 ABDUCTOR HALLUCIS TRANS. HEAD, Med. Div.



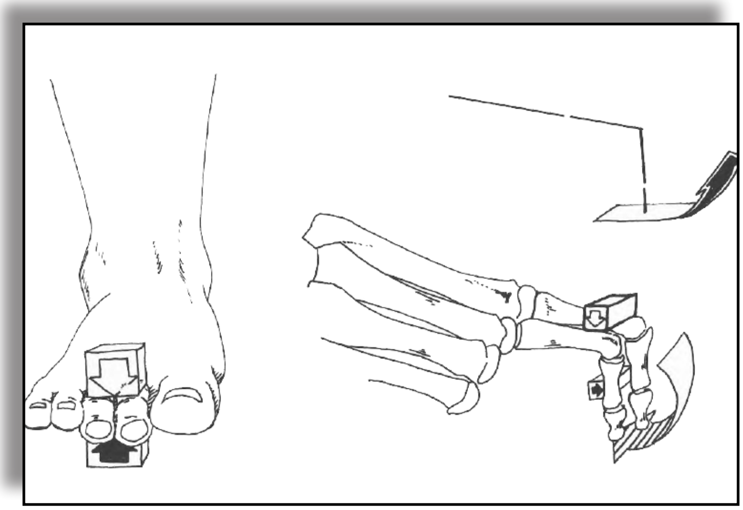
938 ABDUCTOR HALLUCIS TRANS. HEAD, Lat. Div.

GROUP IV

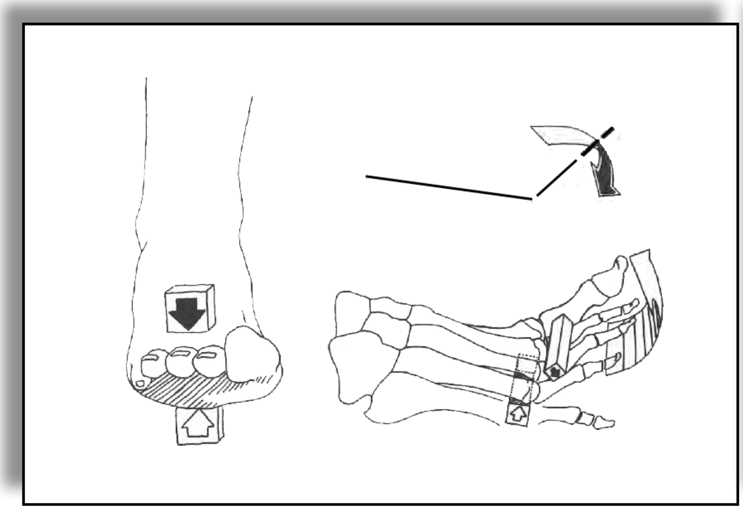
Muscle of the Second Toe



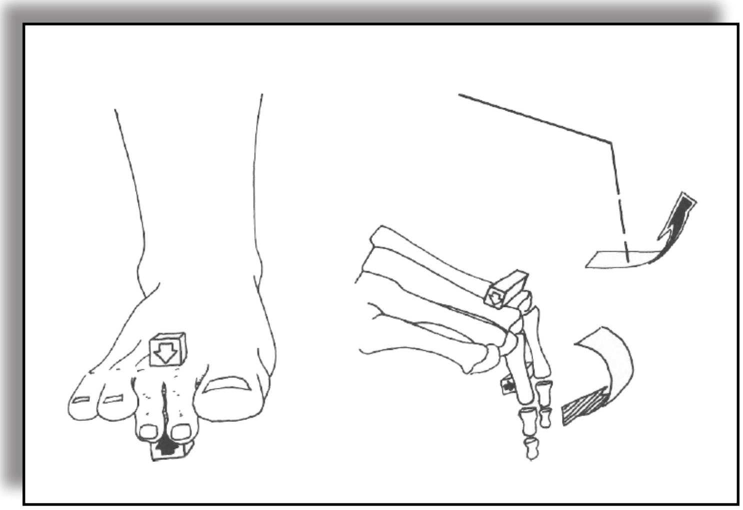
912 EXTENSOR DIGITORUM LONGUS, Medial Div.



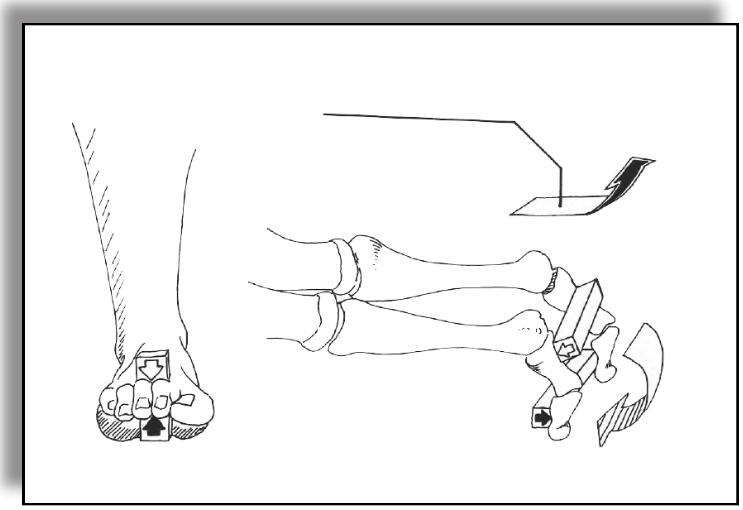
946 FLEXOR DIGITORUM BREVIS, Medial Div.



976 EXTENSOR DIGITORUM BREVIS



942 QUADRATUS PLANTAE, Medial Div.



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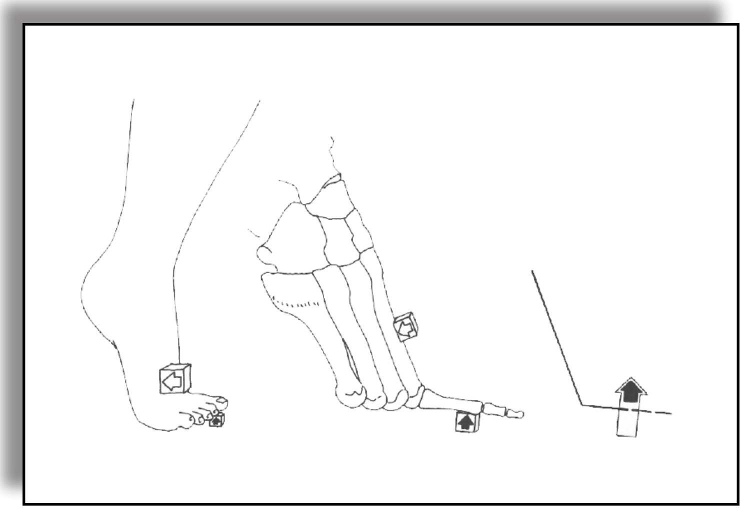
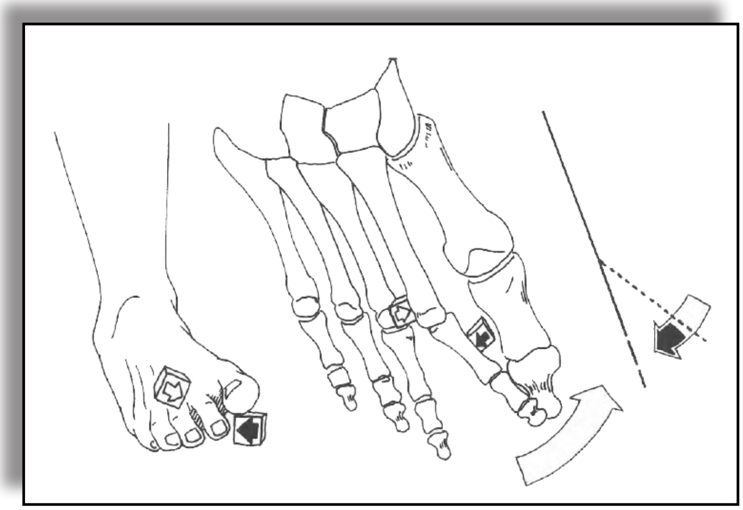
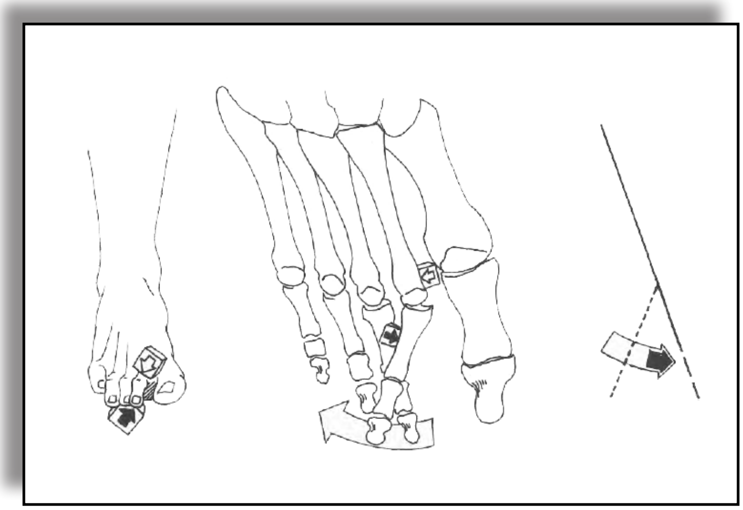


950 FLEXOR DIGITUS PEDIS, Second



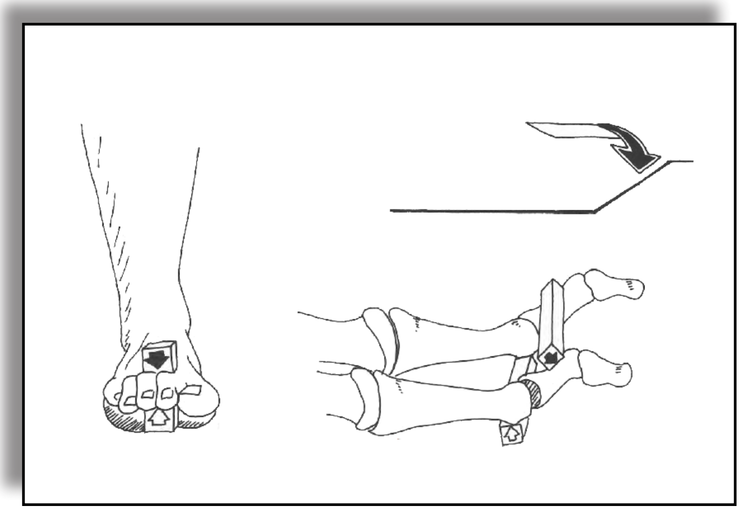
958 ADDUCTOR DIGITUS PEDIS, Second



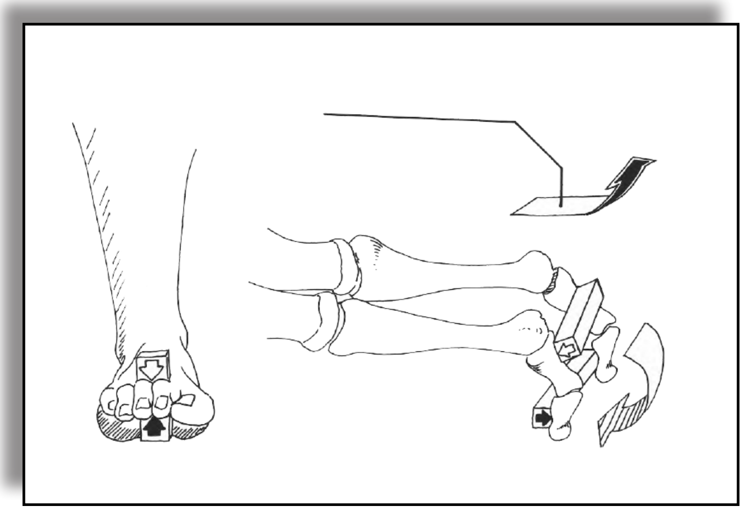
966 ABDUCTOR DIGITUS PEDIS, Second

GROUP V

Muscle of the Third Toe



912 EXTENSOR DIGITORUM LONGUS, Medial Div.



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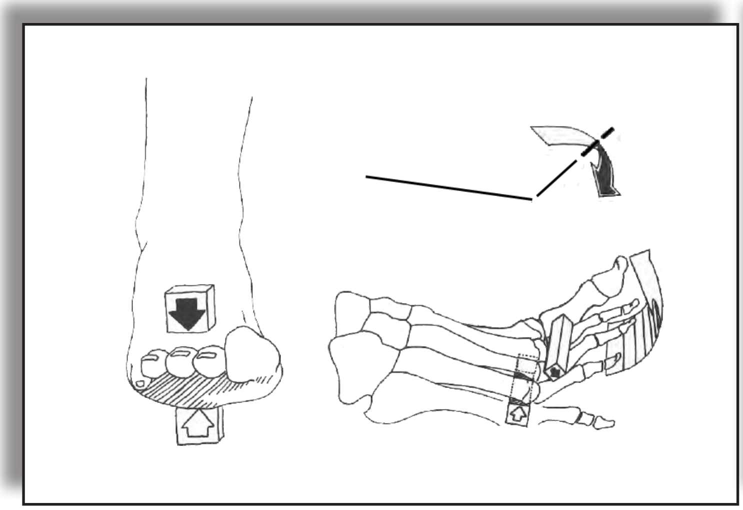

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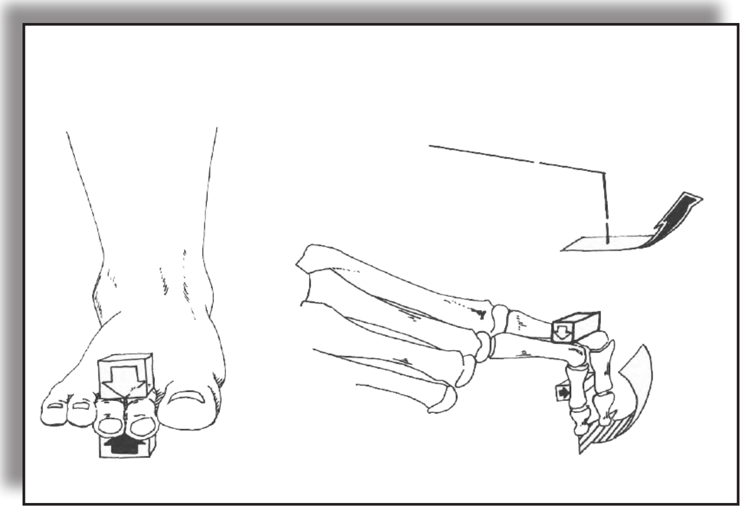

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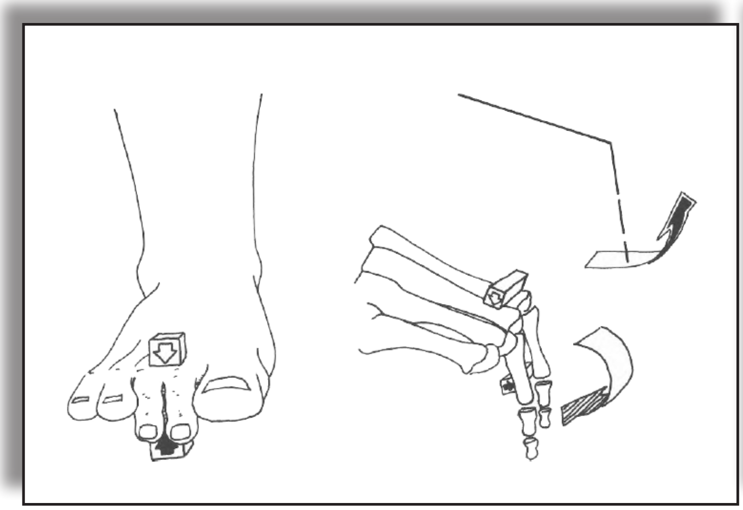
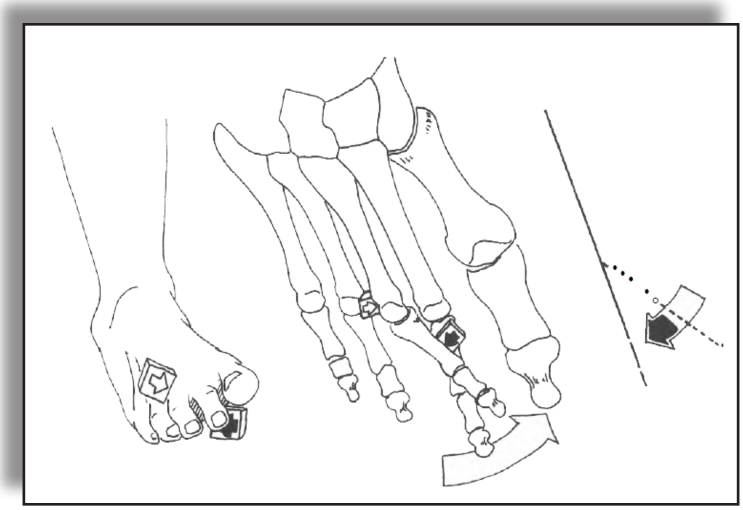


942 QUADRATUS PLANTAE, Medial Div.



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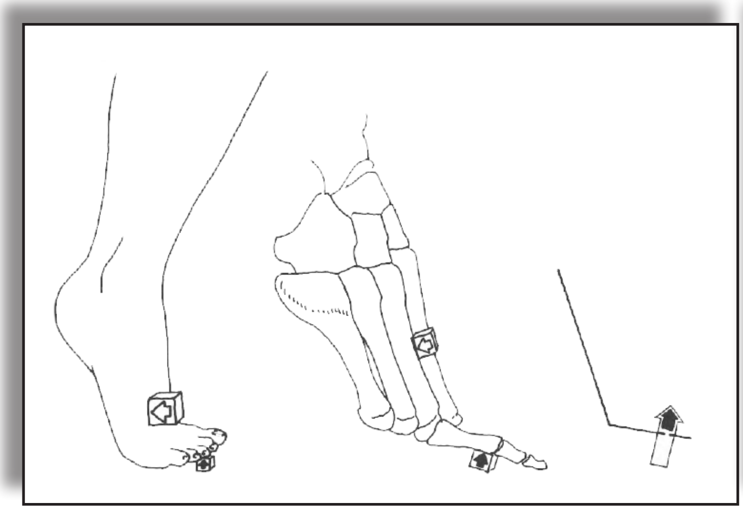
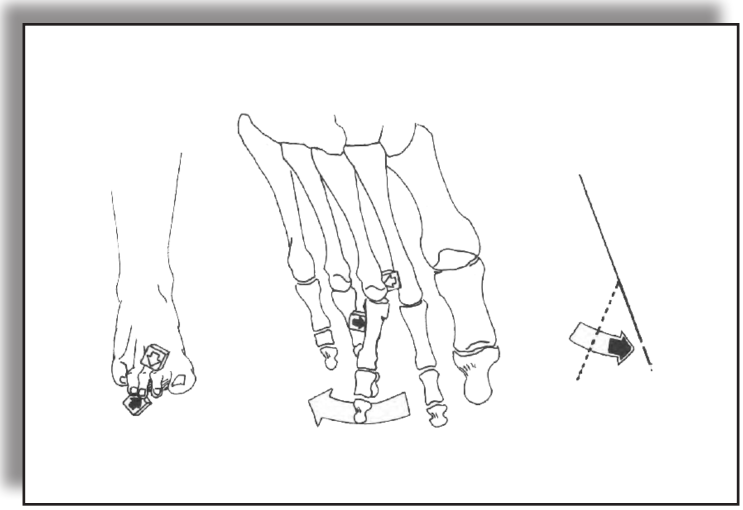


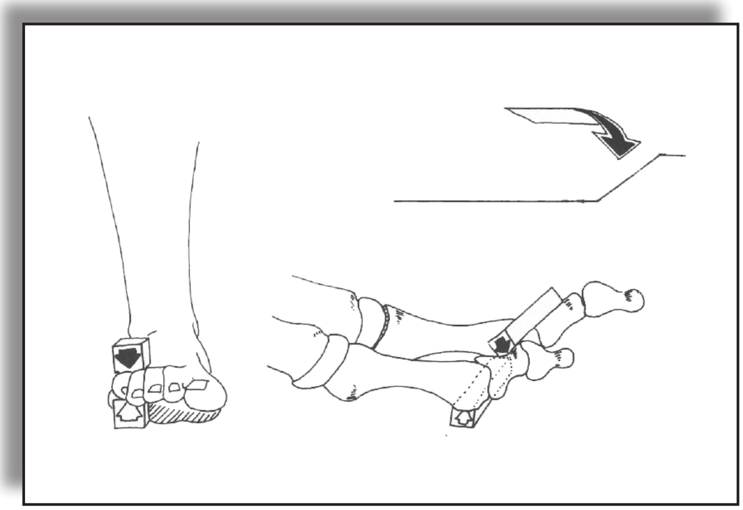
952 FLEXOR DIGITUS PEDIS, Third



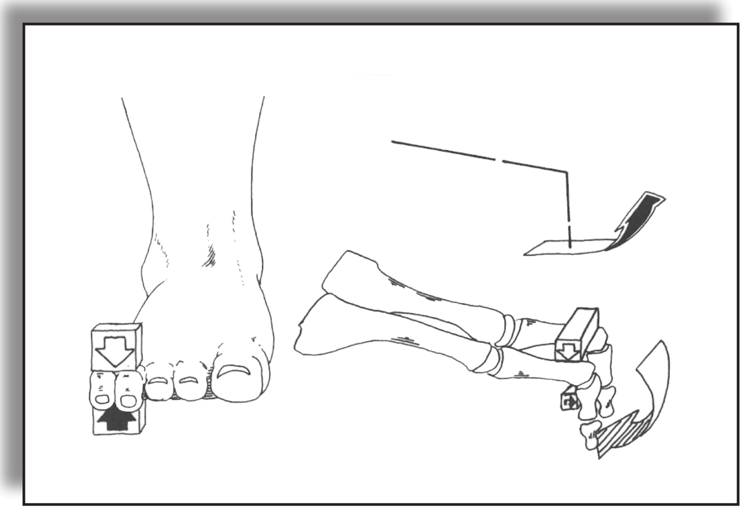
968 ABDUCTOR DIGITUS PEDIS, Third

GROUP VI

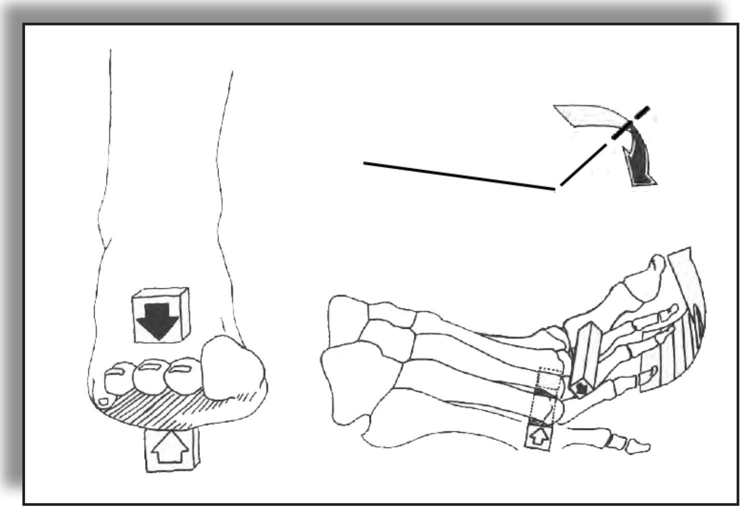
Muscle of Fourth Toe



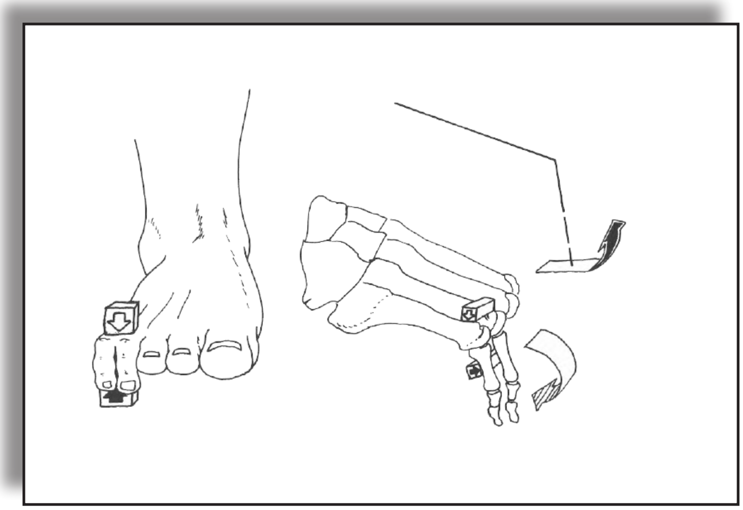
914 EXTENSOR DIGITORUM LONGUS, Lateral Div.



948 FLEXOR DIGITORUM BREVIS, Lateral Div.



976 EXTENSOR DIGITORUM BREVIS



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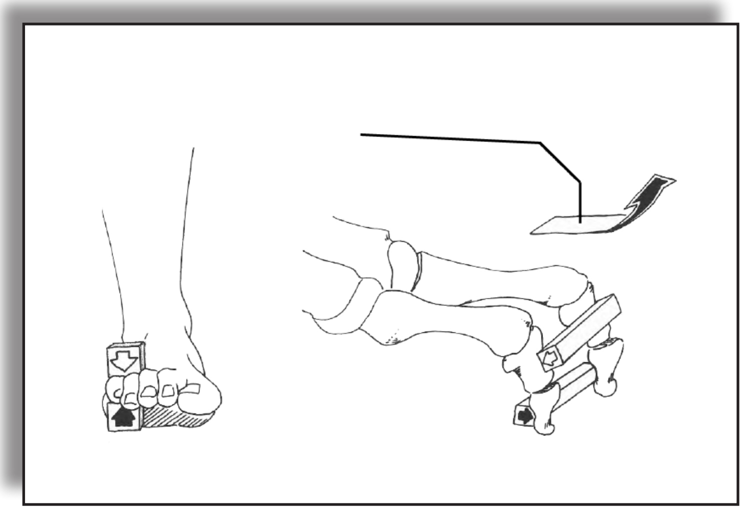
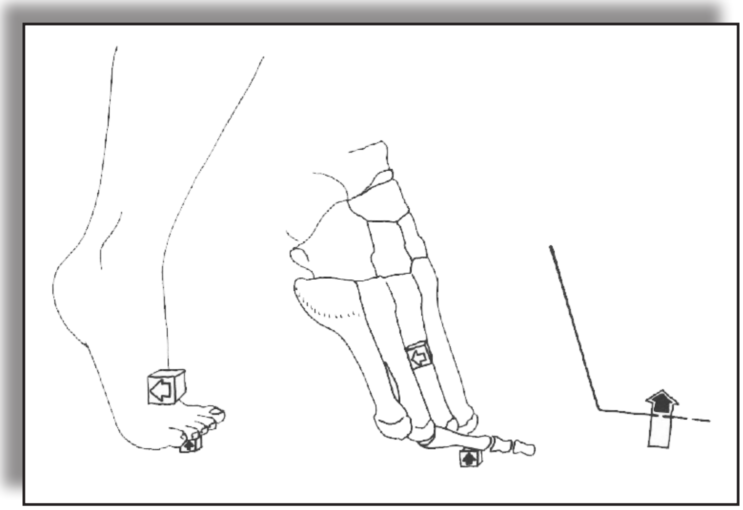
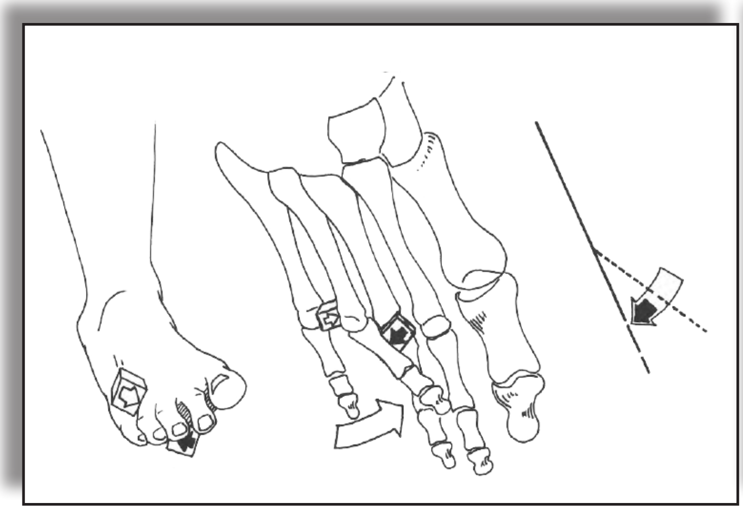


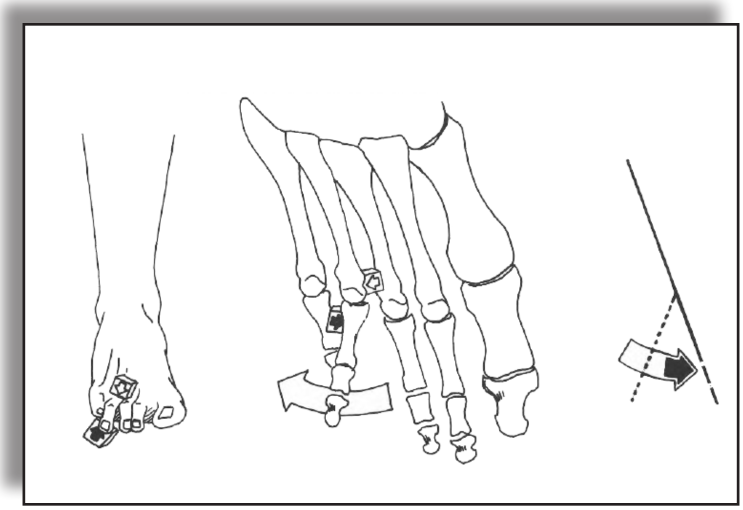
910 FLEXOR DIGITORUM LONGUS, Lateral Div



954 FLEXOR DIGITUS PEDIS, Fourth



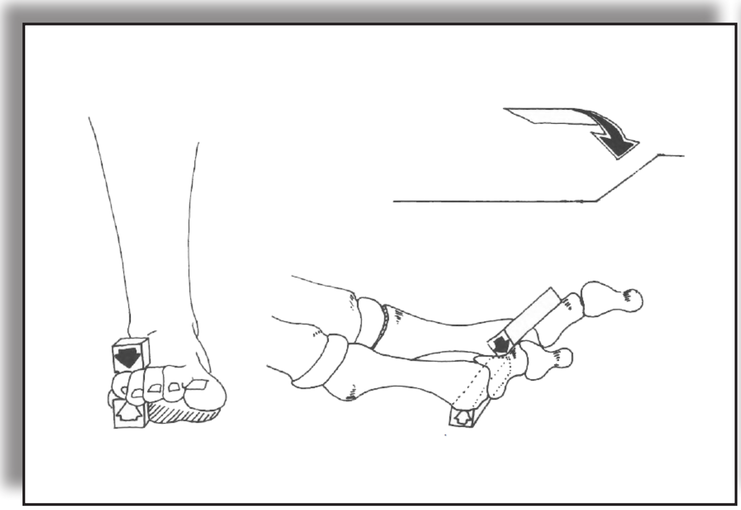
962 ADDUCTOR DIGITUS PEDIS, Fourth



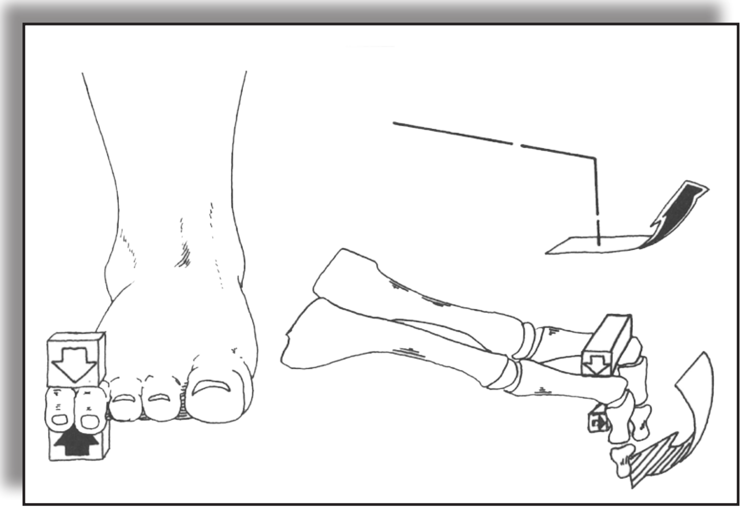
970 ABDUCTOR DIGITUS PEDIS, Fourth

GROUP VII

Muscle of the Fifth Toe



914 EXTENSOR DIGITORUM LONGUS, Lateral Div.



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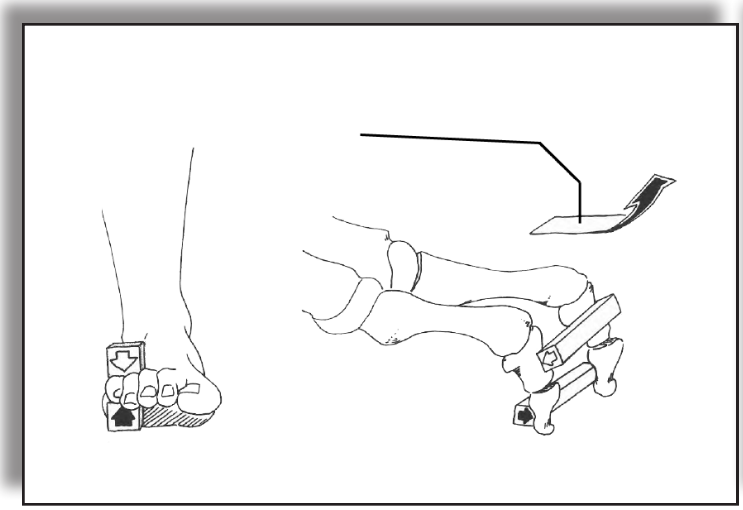

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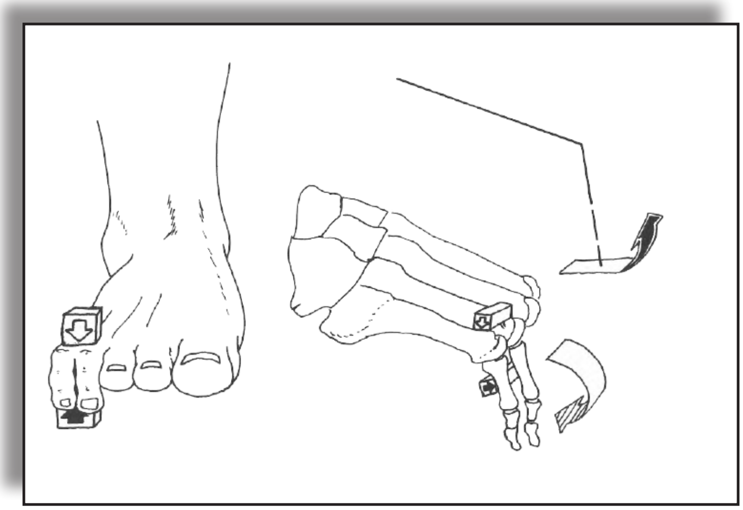
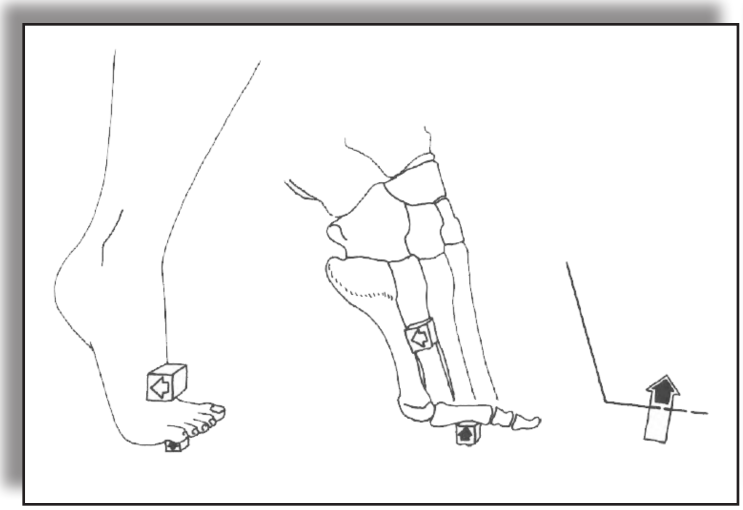
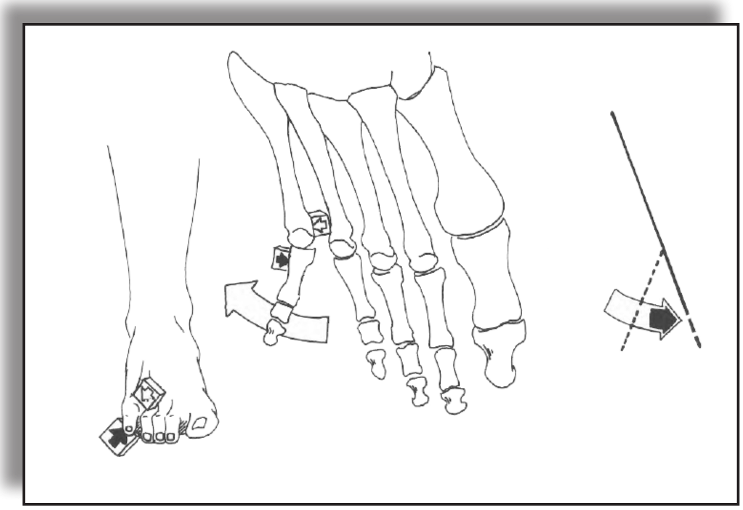


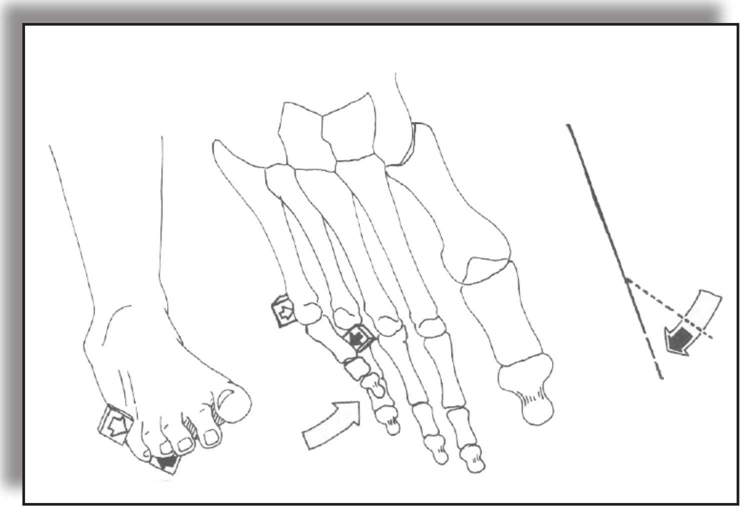
944 QUADRATUS PLANTAE, Lateral Div.



956 FLEXOR DIGITUS PEDIS, Fifth



972 ABDUCTOR DIGITUS PEDIS, Fifth



964 ADDUCTOR DIGITUS PEDIS, Fifth

CHAPTER II

EXTRINSIC MUSCLES OF THE FOOT

USING THE CLINICAL KINESIOLOGY WORKBOOKS

This Clinical Kinesiology workbook of the lower extremities covers the specific information necessary to test and evaluate 52 muscles. The major and most important portion of the workbook is the muscle worksheet. Each muscle is presented in a structured format to provide the necessary information to evaluate possible muscular dysfunctions. The information is displayed on 'seven pictorial drawings which include a word description to properly identify the related local muscle reflexes. The meaning conveyed by each category is as follows:

Origin:	Indicates the area where the muscle origin is most effectively treated and will sometimes vary from the description commonly found in anatomy texts.
Insertion:	Indicates the area where the muscle insertion is most effectively treated.
Test:	Describes the test position found to be most practical and efficient in isolating a particular muscle or its division.
Dr.:	Refers to the doctor (or one performing the test.)
Ipsilateral:	Refers to the muscle being tested on the same side of the body. All pictures are of the right foot.
Contralateral:	Refers to the opposite side of the body to the muscle being tested.
Brace:	Refers to the area being held by the doctor to stabilize the patient for testing.
Contact:	Refers to the area contacted by the doctor in order to test for muscle contraction.

This manual contains several muscles which have divisions not presently accepted in medical texts. These divisions are an outgrowth of personal research obtained while observing patients, studying anatomy books, dissecting cadavers and most important, divisions are based on various reflexes (i.e., a neurovascular reflex) which benefit only a section or part of a normal muscle.

PROCEDURE FOR MUSCLE CORRECTION

Synchronous Pulse and Double-Fingered Contact:

Based upon clinical experience over many years and trial and error testing of many techniques, certain procedures have remained dominant as being most effective when treating a muscle on a local basis. This procedure is the use of a double-fingered bilateral contact. The contact is held until a synchronal pulse is felt. While stimulating any reflex point on the body, always use a two-fingered contact. This is a neutral contact as opposed to a positive or negative single finger contact.

PROCEDURE FOR MUSCLE CORRECTION:

On a local basis, a muscle is directly influenced by one or more of the following factors:

1. Neurovascular
2. Neurolymphatic
3. Visceral Organ Reflex
4. Muscle Acupuncture Point
5. Vertebral Level, Myomere, and Lovett Brother
6. Cranial

7. Foot
8. Nutrition

1. Neurovascular: Description: NV points are generally found on the cranium.

Discussion: Vascular beds of the muscle needing treatment are influenced by using the following procedure until a synchronous pulse is felt. A neurovascular reflex, which is generally located on the surface of the cranium, when activated by a light tugging double fingered contact with one hand and a rotary stimulating contact with the opposite hand at the origin of the muscle, will restore normal circulation to the area associated with that reflex. These contacts are ipsilateral. *Note: Dr. George Goodheart is responsible for the development of the original neurovascular muscular relationships.*

2. Neurolymphatic: Description: NL points are generally found between the ribs.

Discussion: The lymphatics of the muscle being treated are influenced by using the following procedure until a synchronous pulse is felt. A neurolymphatic reflex, which is generally located in the rib cage, when activated by a rotary stimulating contact with the opposite hand at the insertion of the muscle, will produce lymphatic flushing of the areas associated with that reflex. Both the right and left muscle group are treated by using the same reflex. *Note: Dr. George Goodheart is responsible for the development of the original neurolymphatic muscular relationships.*

3. Visceral Organ I and II: Description: VOR I and II are the primary and secondary visceral organ reflexes.

Discussion: Somato-visceral influences and vicero-somatic reflexes are common feedback systems with the local computer. A muscle is primarily associated with two specific organs. They are listed as Visceral. Organ I (VOR I) and Visceral Organ II (VOR II). They are treated as follows: A VOR, which is generally located on the abdomen or other specific areas of the body, when activated by a rotary stimulating contact with one hand and a rotary stimulating contact with the opposite hand on the Muscle Acupuncture Point, will restore normal interaction between somato-visceral and viscero-somatic functions of the body. Following stimulation, hold until a synchronous pulse is detected.

4. Muscle Acupuncture Point: Description: M.A.P. is a specific reflex for the muscle being tested and is located contralateral to the muscle being tested.

Discussion: Each muscle has a specific acupuncture point located on the opposite side, which acts as an energizer and a point of circuitry overload, located within or around the normal acupuncture points as previously described by Felix Mann. For treatment procedure, see VOR reflex).

5. Vertebral Level, Myomere, and Lovett Brother:

Discussion: VL, MM and VBVL are three primary areas of neurological input from the spinal cord to each muscle. The first area is called the myomere and reflects areas of normal neurological innervation to a specific muscle. The vertebral level is a phenomenon not clearly understood but is frequently found associated with each muscle aberration. When either of these levels two-point, adjust the area as indicated and tap for recall. Occasionally it is necessary to pulse the MM or VL or both to the muscle. The Lovett Brother is tthe vertebrae, at the opposite end of the spine from the VL, that moves synchronistically with the V.L.

6. Cranial: Related extraspinal subluxation that occurs as a compensatory involvement in muscle aberration.

7. Foot: Related extraspinal subluxation that occurs as a compensatory involvement in muscle aberration.

8. Nutrition: Each muscle has a specific nutrient associated with it. Nutrition is indicated when the neurolymphatic reflex is not an N.R.L and the insertion of the muscle has a positive therapy localization that is an N.R.L..

PRIORITY TREATMENT:

1. Test and record all weak muscles.
2. Use computer clearout technique (See Clearing Techniques in Instruction Manual)
3. Retest the muscles to determine which one remained weak.
4. The weak muscle is considered a ONE-POINT.
5. Mark the major reflexes associated with the muscle:
   NV, NL, VOR I, VOR II, VL, MM, Cranial, Foot, and LBVL.
6. Have the patient therapy localize (TL) each reflex point while testing the muscle.
   The reflex that causes the weak muscle to become strong is considered the TWO-POINT.
7. Check the TWO-POINT reflex to make sure it is an NRL.
8. Treat the reflex that is the NRL in the appropriate manner.
   (See procedure for Muscle Correction).
   NV - Origin
   NL - Insertion (MAP - VOR I MAP - VOR II MAP - Muscle)
   VL - Adjust, then pulse to muscle
   MM - Adjust, then pulse to muscle
   Cranial
   Foot
9. If two reflex points are indicated as NRL's, use the THREE-POINT technique. The THREE-POINT technique helps to determine which of the major reflexes is to be treated. The procedure is as follows:
   a) The weak muscle is the ONE-POINT.
   b) The reflex point that strengthens the muscle is the TWO-POINT.

c) While the patient TL's the reflex point that strengthened the weak muscle, if any other reflex point changes the indicator muscle, it is considered the THREE-POINT and the major point to be treated.

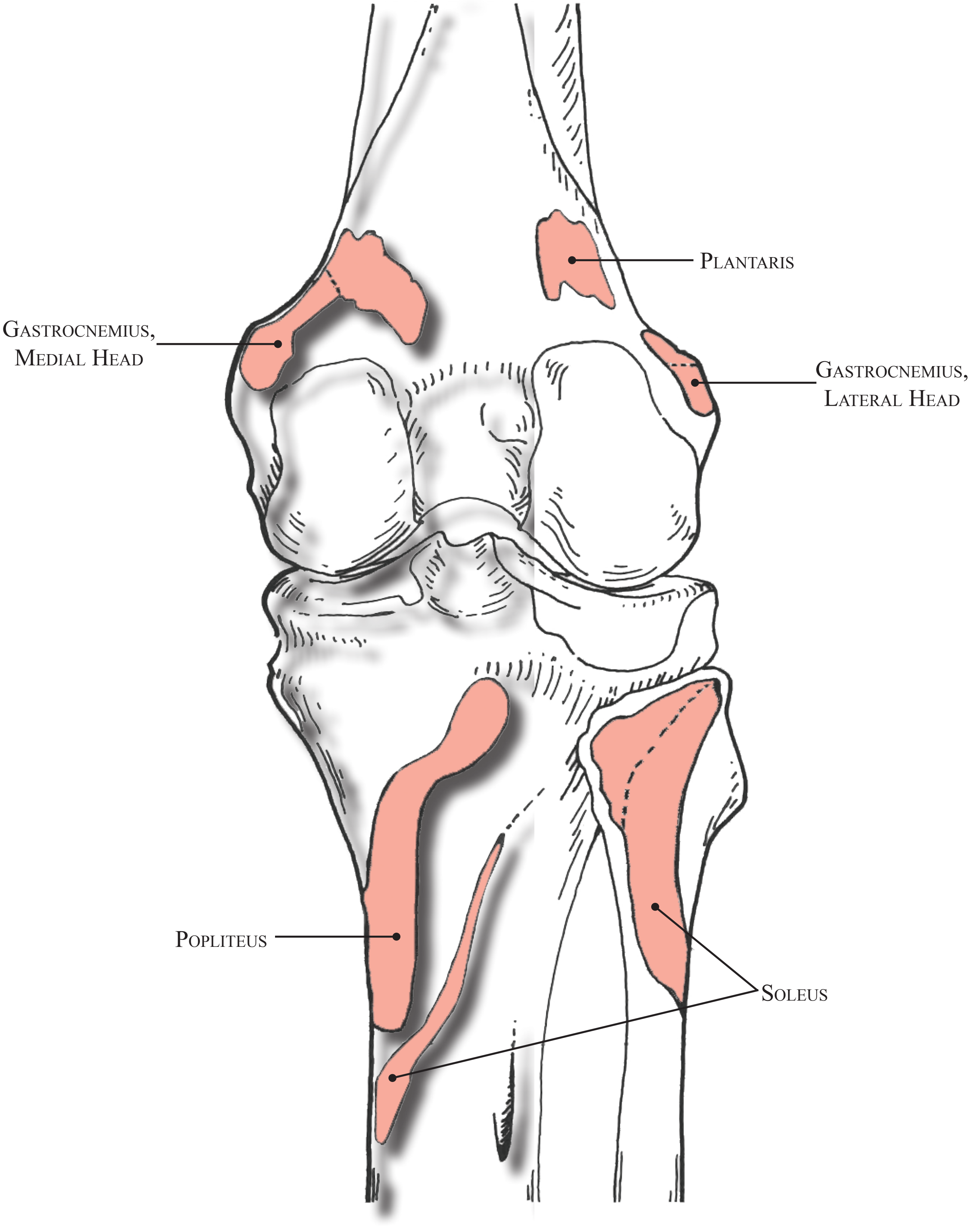
Most anatomical texts study muscles based on the location of the muscle belly. Thus muscles of the calf are all the muscles whose anatomical muscle fibers are between the knee and ankle. In this manual, muscles will be listed and grouped according to their insertion. The insertion of a muscle is where the effect of muscle contraction is most optimally seen. As kinesiologists, we are primarily interested in muscle action and its measurement.

For ease of understanding, the muscles are listed by insertion and then subdivided into muscles that have a similar origin. For example, the first group of muscles presented is muscles of the calf that insert on the calcaneus. The second group is the muscles of the calf that insert on the arch of the foot.

Once the logical arrangement of muscles has been made, a computer number has been assigned. These numbers will be in the general area of previous computer numbers but are now in a new order. The previous numbers were based on a sequence of muscle tests which have now been modified as research has progressed.

ORIGIN AND INSERTION

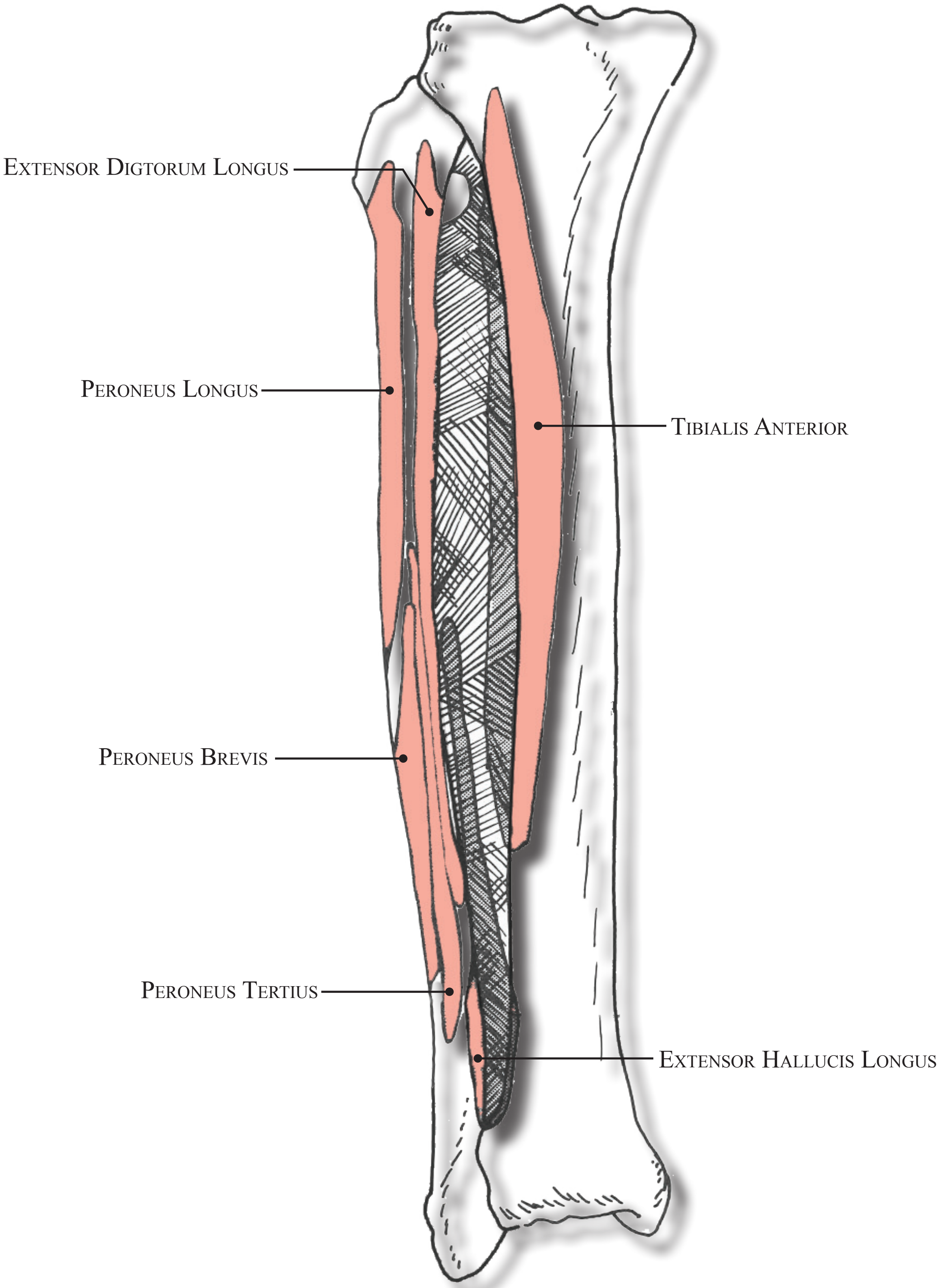
CALF MUSCLES


PLANTARIS
GASTROCNEMIUS, MEDIAL HEAD
GASTROCNEMIUS, LATERAL HEAD
POPLITEUS
SOLEUS

POSTERIOR VIEW OF KNEE

ORIGIN AND INSERTION

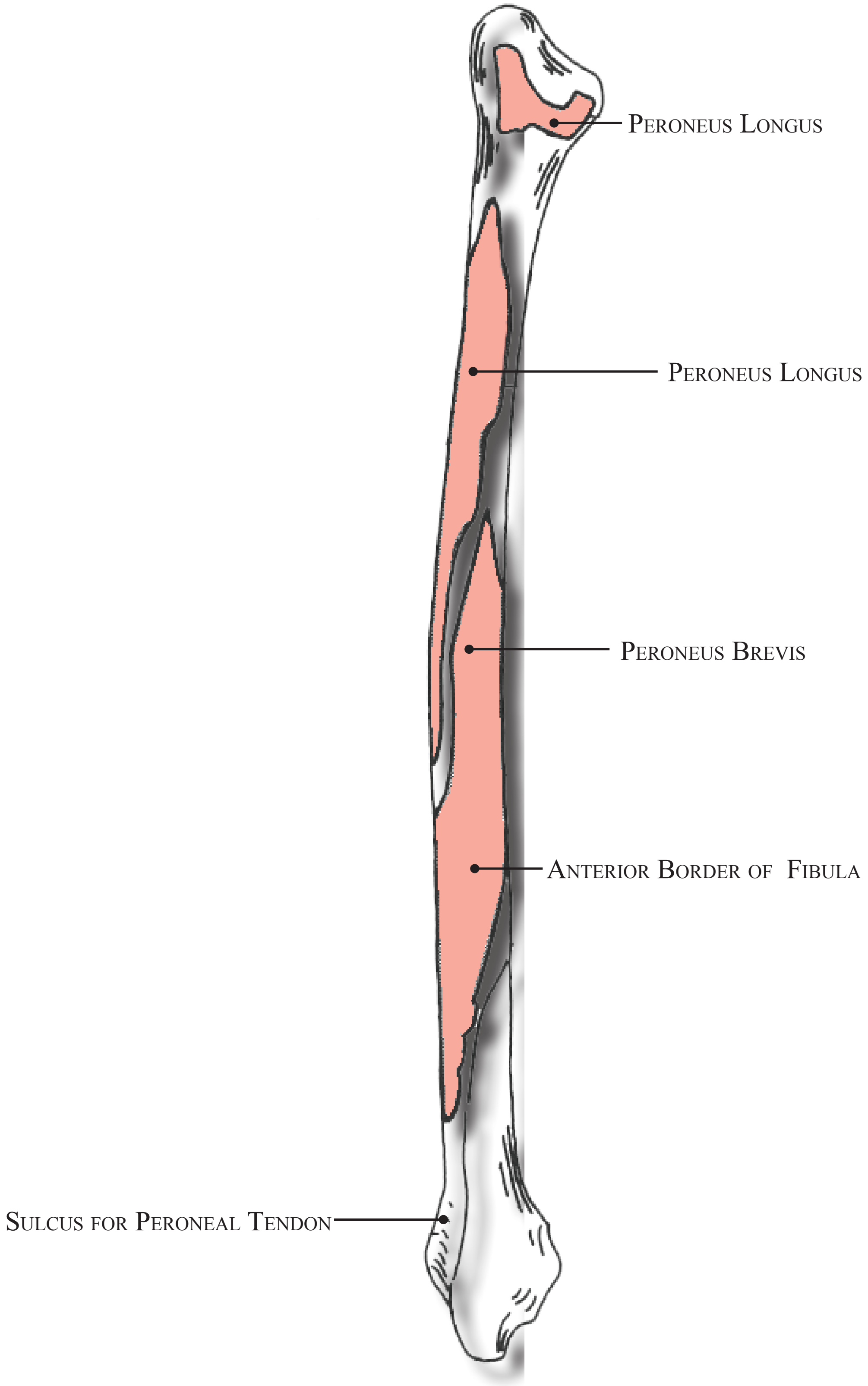
CALF MUSCLES


EXTENSOR DIGTORUM LONGUS
PERONEUS LONGUS
TIBIALIS ANTERIOR
PERONEUS BREVIS
PERONEUS TERTIUS
EXTENSOR HALLUCIS LONGUS

ANTERIOR VIEW OF TIBIA AND FIBULA

ORIGIN AND INSERTION

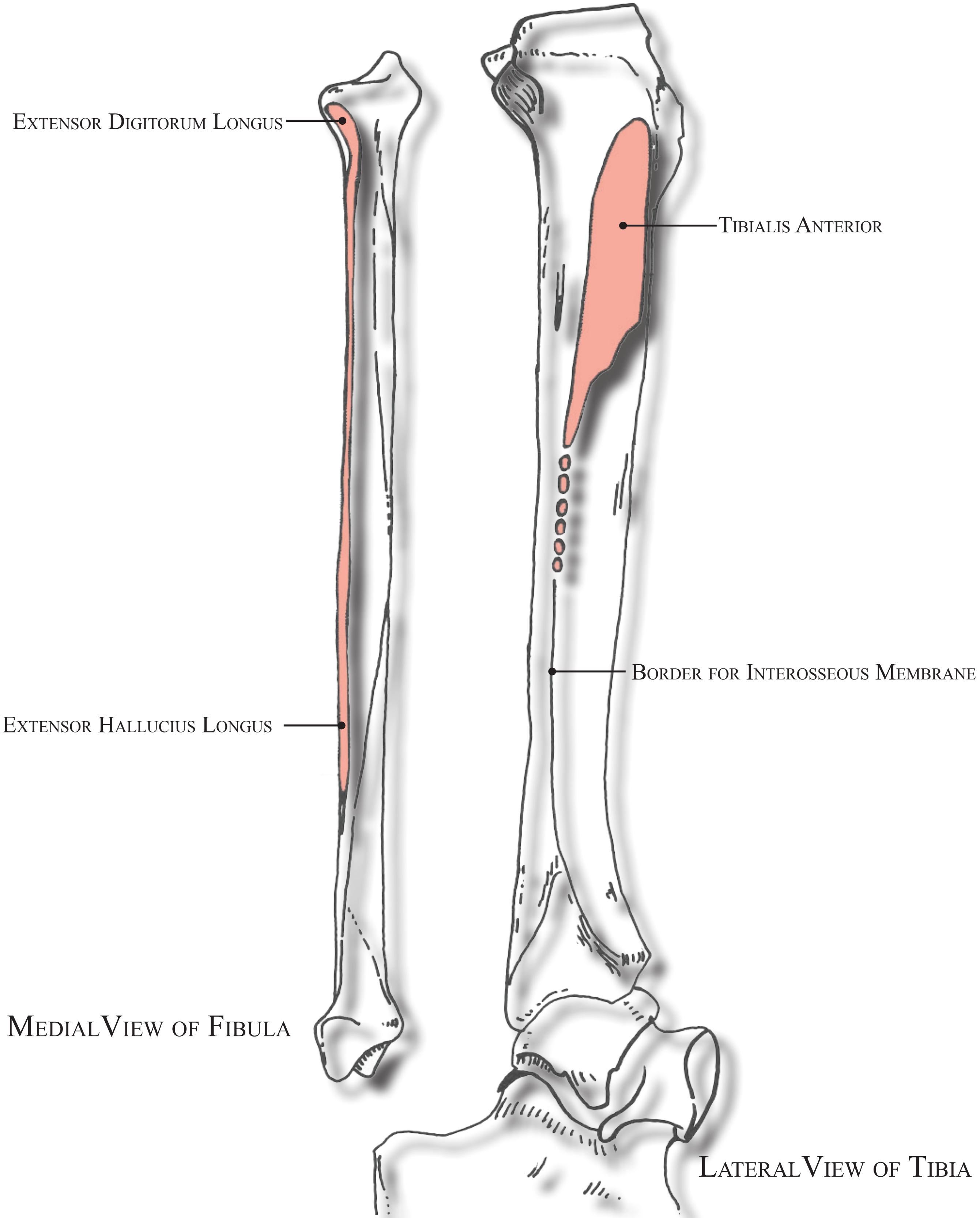
CALF MUSCLES


PERONEUS LONGUS
PERONEUS LONGUS
PERONEUS BREVIS
ANTERIOR BORDER OF FIBULA
SULCUS FOR PERONEAL TENDON

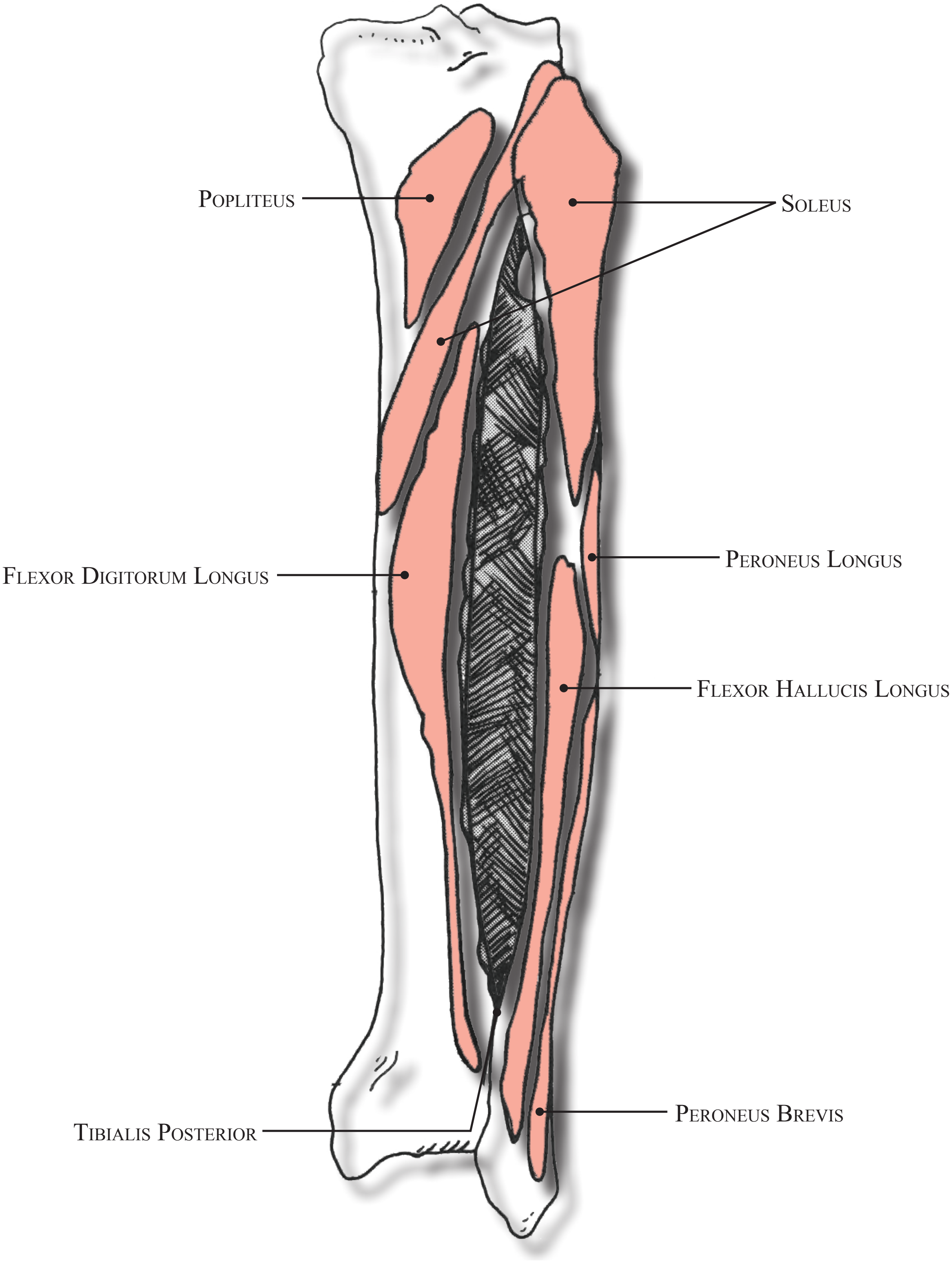
LATERAL VIEW OF FIBULA

ORIGIN AND INSERTION

CALF MUSCLES


EXTENSOR DIGITORUM LONGUS
TIBIALIS ANTERIOR
BORDER FOR INTEROSSEOUS MEMBRANE
EXTENSOR HALLUCIUS LONGUS
MEDIAL VIEW OF FIBULA
LATERAL VIEW OF TIBIA

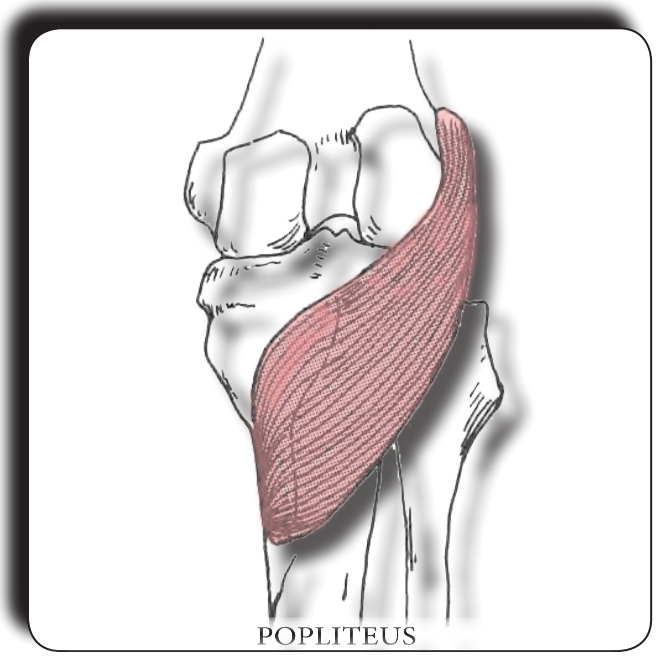
CALF MUSCLES


POPLITEUS
SOLEUS
FLEXOR DIGITORUM LONGUS
PERONEUS LONGUS
FLEXOR HALLUCIS LONGUS
TIBIALIS POSTERIOR
PERONEUS BREVIS

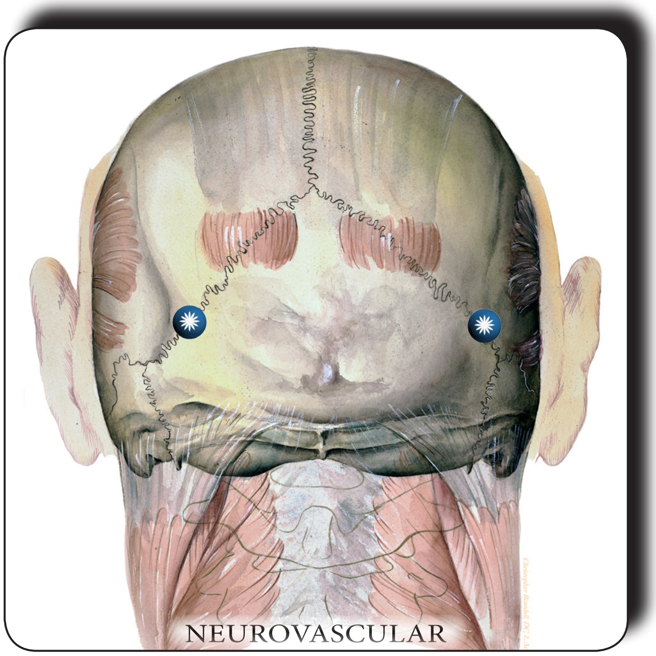
POSTERIOR VIEW OF TIBIA AND FIBULA

SECTION I:

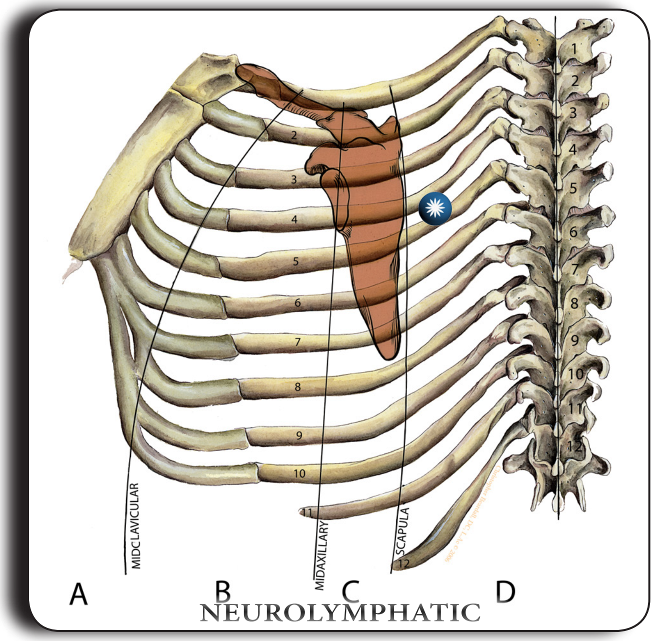
CALF AND ANKLE



POPLITEUS



NEUROVASCULAR


1
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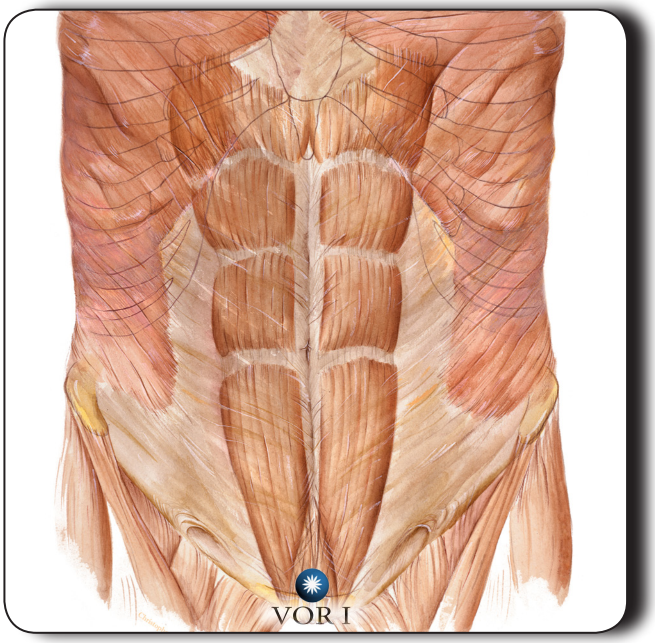
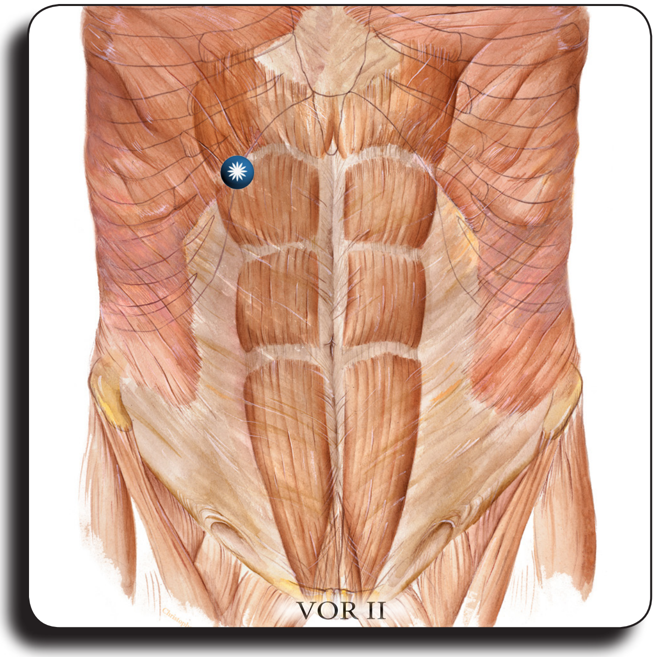
8
9
10
12
MIDCLAVICULAR
MIDAXILLARY
SCAPULA
A
B
C
D

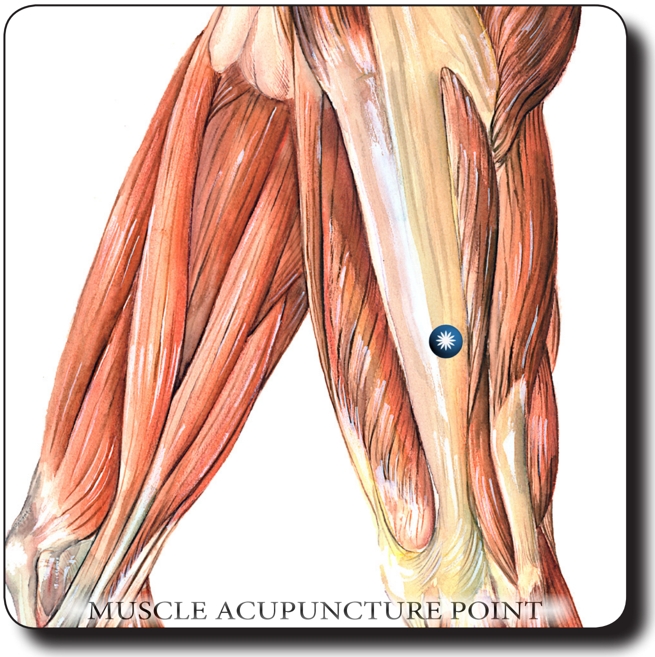
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 870: POPLITEUS

ORIGIN: Lateral condyle of femur, oblique popliteal ligament of knee and outer margins of the lateral meniscus.

INSERTION: Triangle area on proximal posterior surface of the tibia above soleal line.

ACTION: With femur fixed, flexes the calf on the femur and internally rotates the tibia. With tibia fixed, rotates the femur externally

TEST:

Patient: Position Supine.
M.T.P.: Flex ipsilateral femur on hip 45 degrees, flex ipsilateral leg on femur 90 degrees. completely internally rotate calf on femur
Doctor:
Position: End of table facing patient.
Brace: Ipsilateral calcaneus laterally.
Contact: Ipsilateral aspect of foot at arch.
Direction: Externally rotate leg on femur.

NEUROVASCULAR: (Post/BL) Lambdoidal suture, lower lateral aspect, near junction of squamosal suture.

NEUROLYMPHATIC: (Post/L) Fourth I.C.S., 3" lateral to spine.

VISCERAL ORGAN:

I. *Vaginal Vault/Penis:* (Ant/Midline) Cv 3, 1" above pubes.

II. *Gall Bladder:* (Ant/R) Rectus abdominis lateral border; near the orgin of the fourth section.

M. A. P. : G 32 1/4

V.L. : L1 R

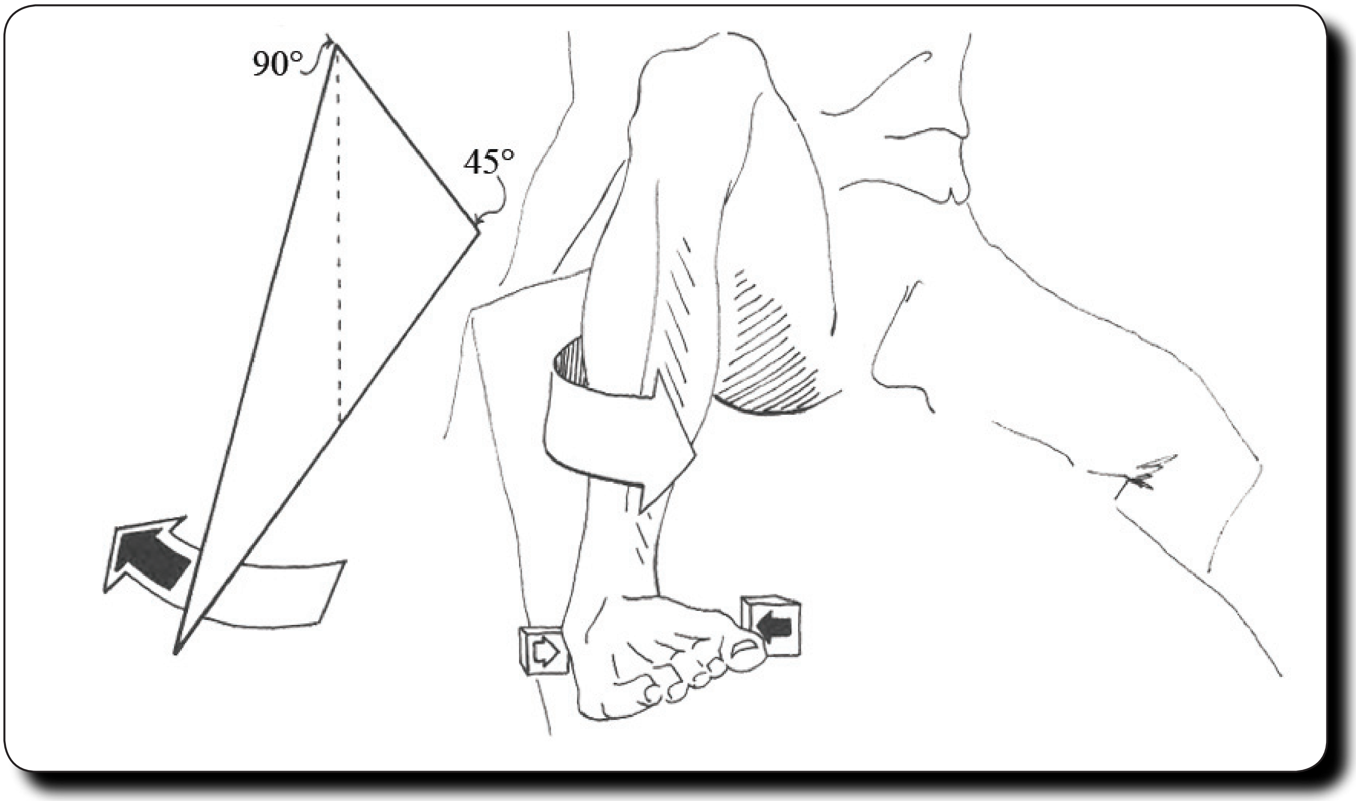
L. B. V.L. : C5 R

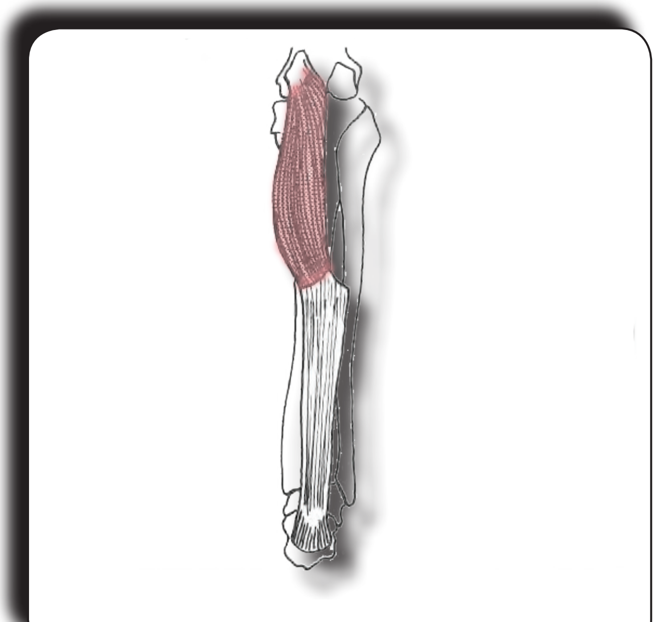
M. M. : L5

CRANIAL: Temporal Bone

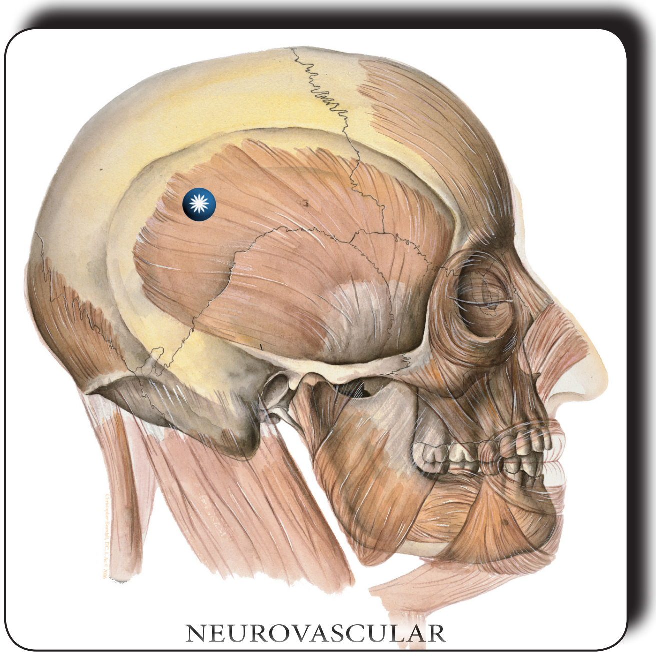
FOOT: Cuboid

NUTRIENT SOURCE: Inositol
1. Core Inositol (N.W.)





GASTROCNEMIUS (MEDIAL HEAD)



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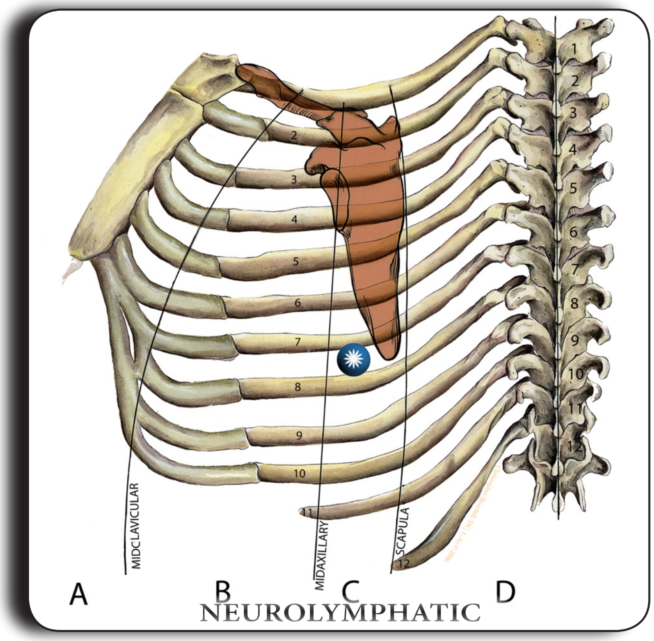
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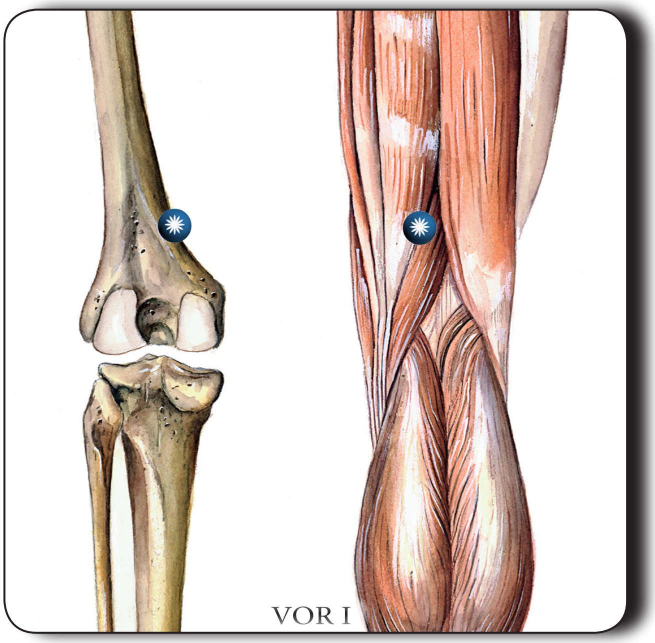
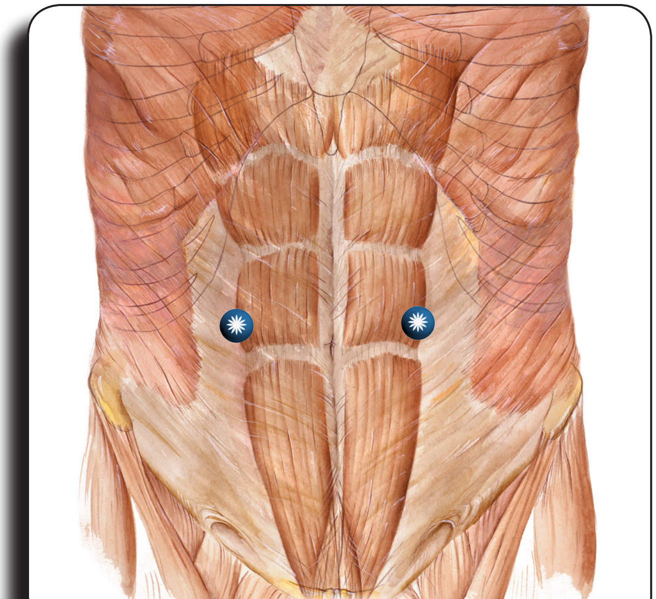
NEUROLYMPHATIC



VOR I



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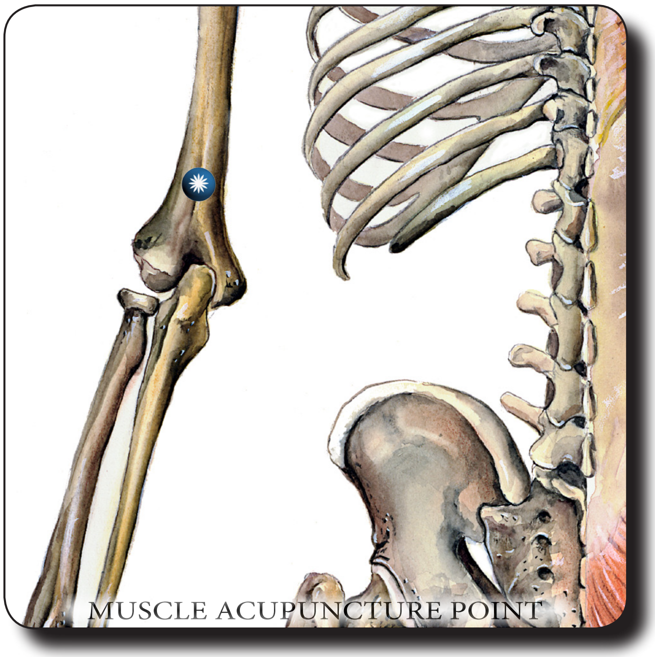


MUSCLE ACUPUNCTURE POINT

Muscle 872: GASTROCNEMIUS, (Medial Head)

ORIGIN: Medial condyle and adjacent part of femur, capsule of knee joint.

INSERTION: Calcaneus via the calcaneal tendon.

ACTION: With origin fixed, plantar flexes the foot. With insertion fixed, flexes femur on calf.

TEST:

Patient: Position: Supine.
M.T.P.: Flex ipsilateral femur on hip while in neutral position. Flex ipsilateral knee 110 degrees. Fully internally rotate leg and plantar flexfoot.
Doctor:
Position: End of table facing patient.
Brace: Ipsilateral knee.
Contact: Ipsilateral calcaneus.
Direction: Extend calf on thigh.

NEUROVASCULAR: (Lat) Parietal bone, 4" superior and 2" posterior to external auditory canal, inferior to superior temporal line.
NEUROLYMPHATIC: (Post/L) Seventh I.C.S., parascapular area, 6" lateral to spine.

VISCERAL ORGAN:

I. *Duodenum:* (Post/BL) Belly of semimembranosus, medial side, 2"superior to origin of gastrocnemius.

II. *Kidney:* (Ant/BL) Rectus abdominis, second section, lateral border, 1" superior to umbilicus.

M. A. P. : T 11

V.L. : T11 R

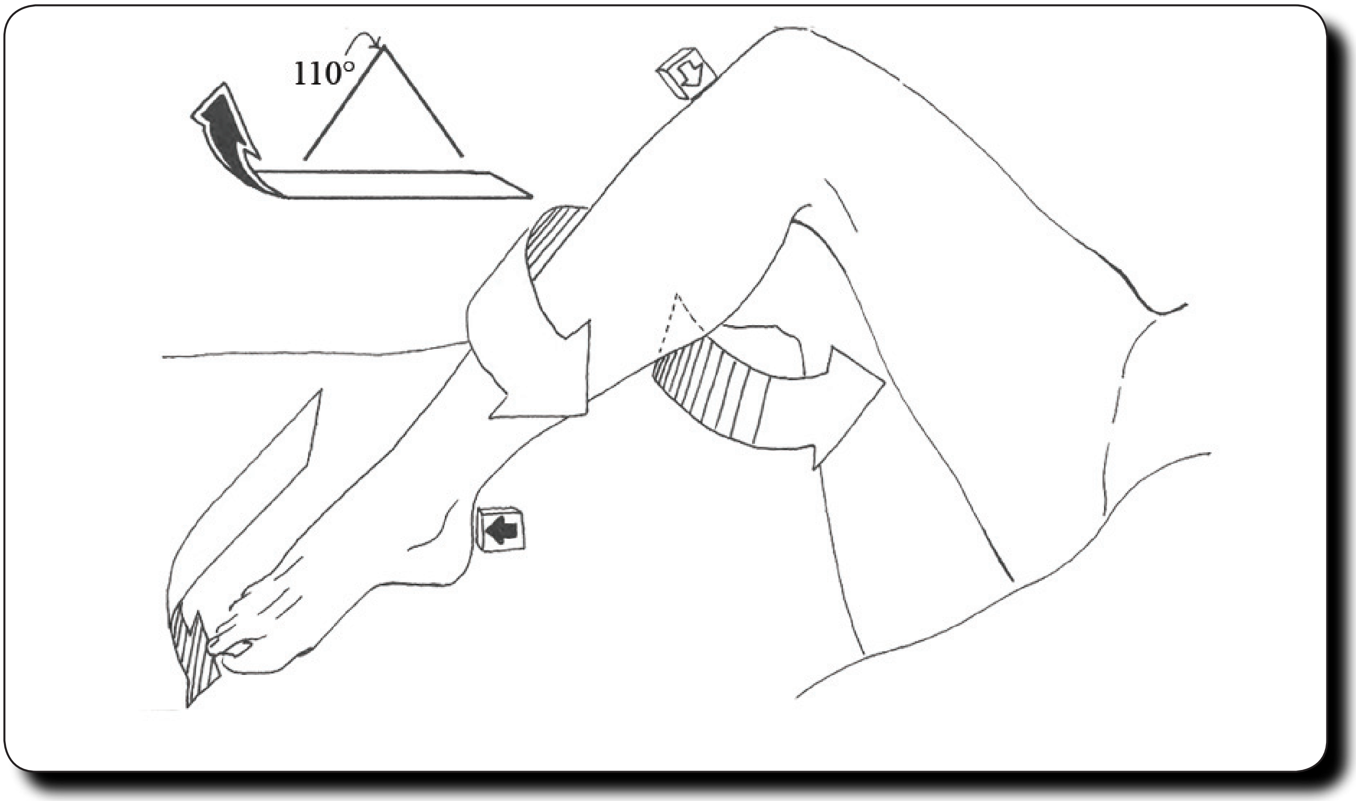
L. B. V.L. : C7 R

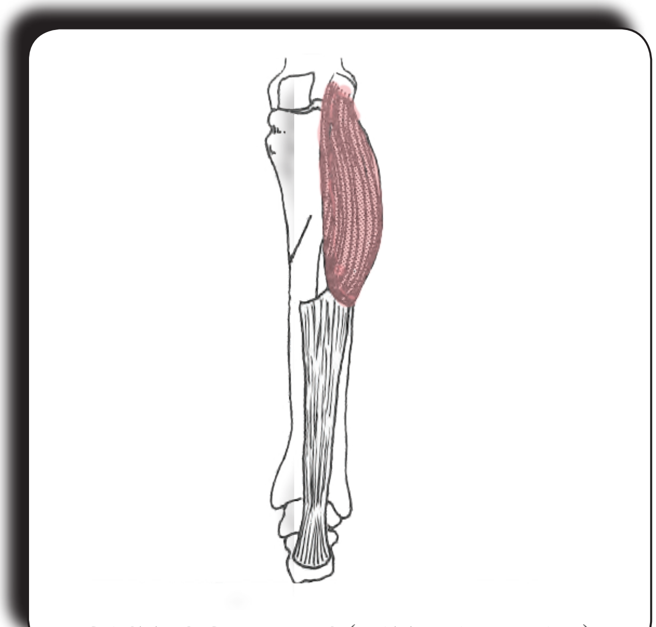
M. M. : S2

CRANIAL: Occiput (See Volume III forcranial correction).

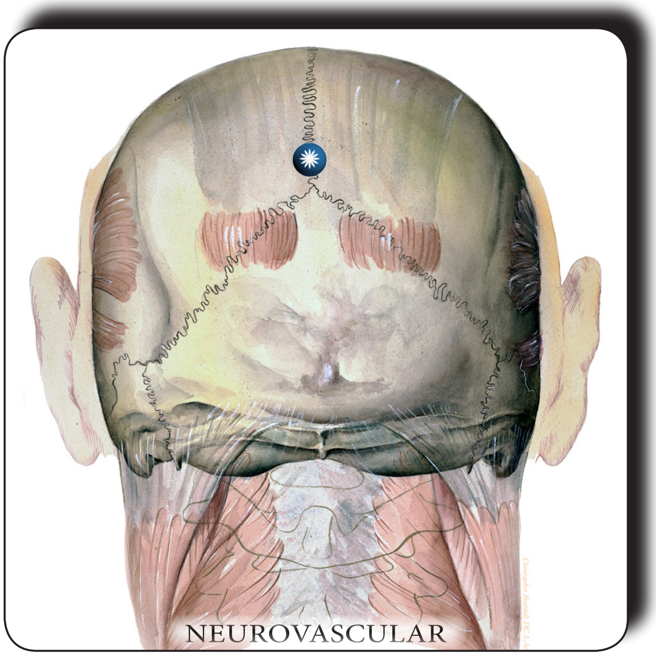
FOOT: Calcaneus

NUTRIENT SOURCE: Phosphorus
1. Phosfood (S)
2. Core Phosphorus (N.W.)
3. Phos-Tab (N.W.)





GASTROCNEMIUS (LATERAL HEAD)



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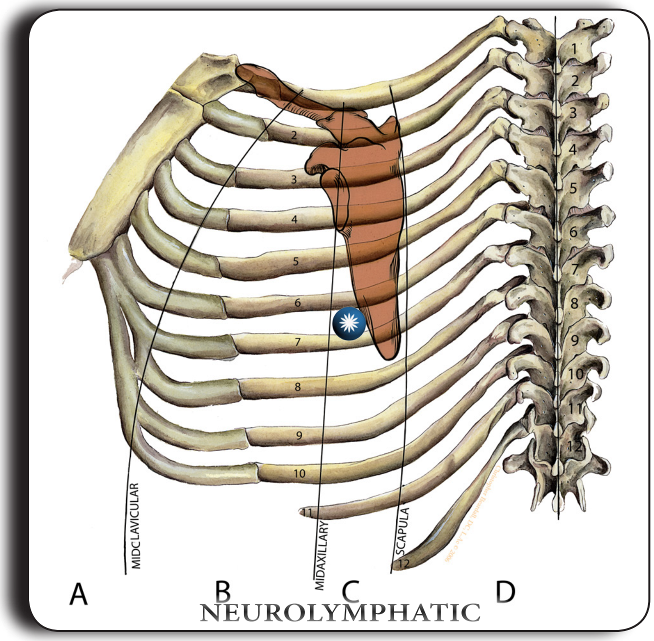
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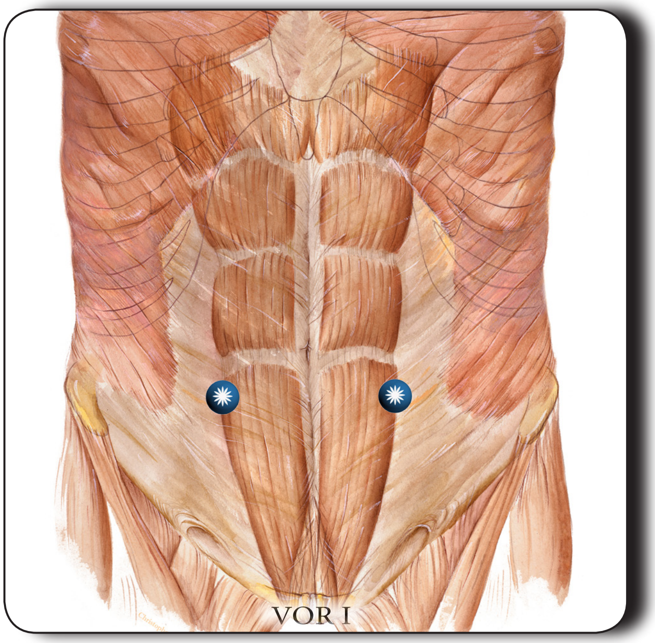
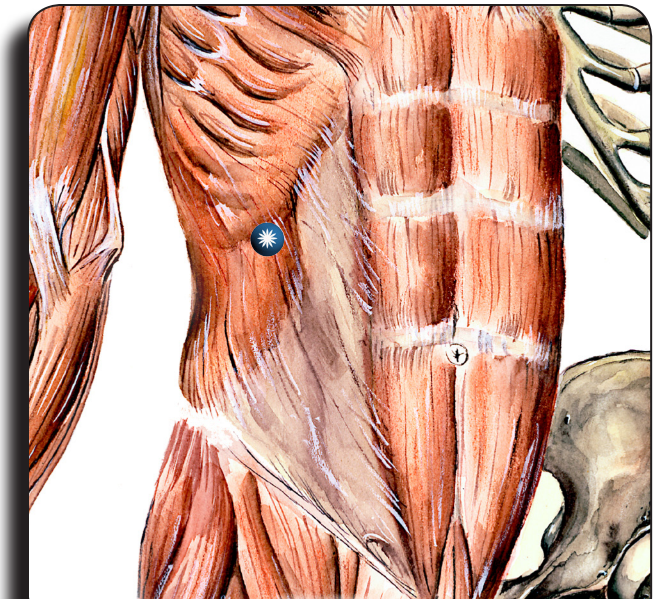
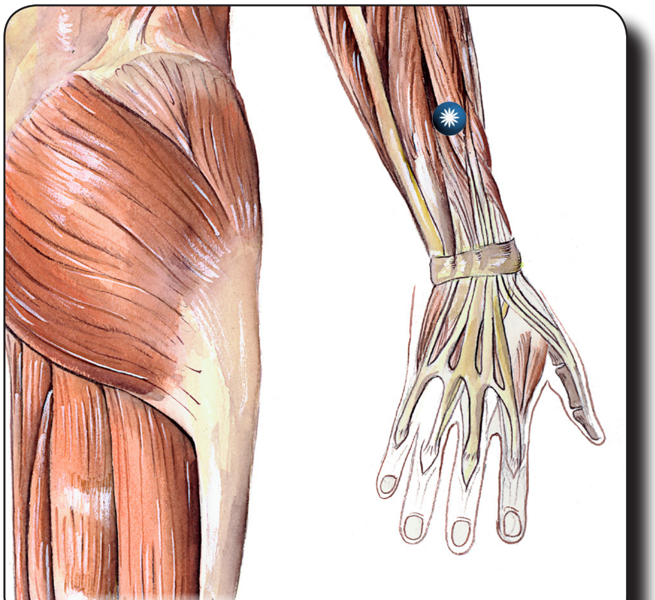
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 874: GASTROCNEMIUS, (Lateral Head)

ORIGIN: Lateral condyle and adjacent part of femur, capsule of knee joint.

INSERTION: Calcaneus via the calcaneal tendon.

ACTION: With origin fixed, plantar flexes foot. With insertion fixed, flexes femur on calf.

TEST:

Patient: Position: Supine.
M.T.P.: Flex ipsilateral femur on hip. Flex knee 110 degrees. Fully externally rotate calf on thigh.

Doctor:
Position: End of table facing patient.
Brace: Ipsilateral knee.
Contact: Ipsilateral calcaneus.
Direction: Extend leg on thigh.

NEUROVASCULAR: (Post/Midline) Sagittal suture just superior to posterior fontanelle.

NEUROLYMPHATIC: (Post/L) Sixth I.C.S., parascapulararea, 6” lateral to spine.

VISCERAL ORGAN:

I. *Colon - Ascending and Descending:* (Ant/BL) Rectus abdominis, first section, lateral aspect, just inferior to level of umbilicus.

II. *Liver:* (Ant/R) Sp 16, just inferior to rib cage.

M. A. P. : Li 6

V.L. : T9 L

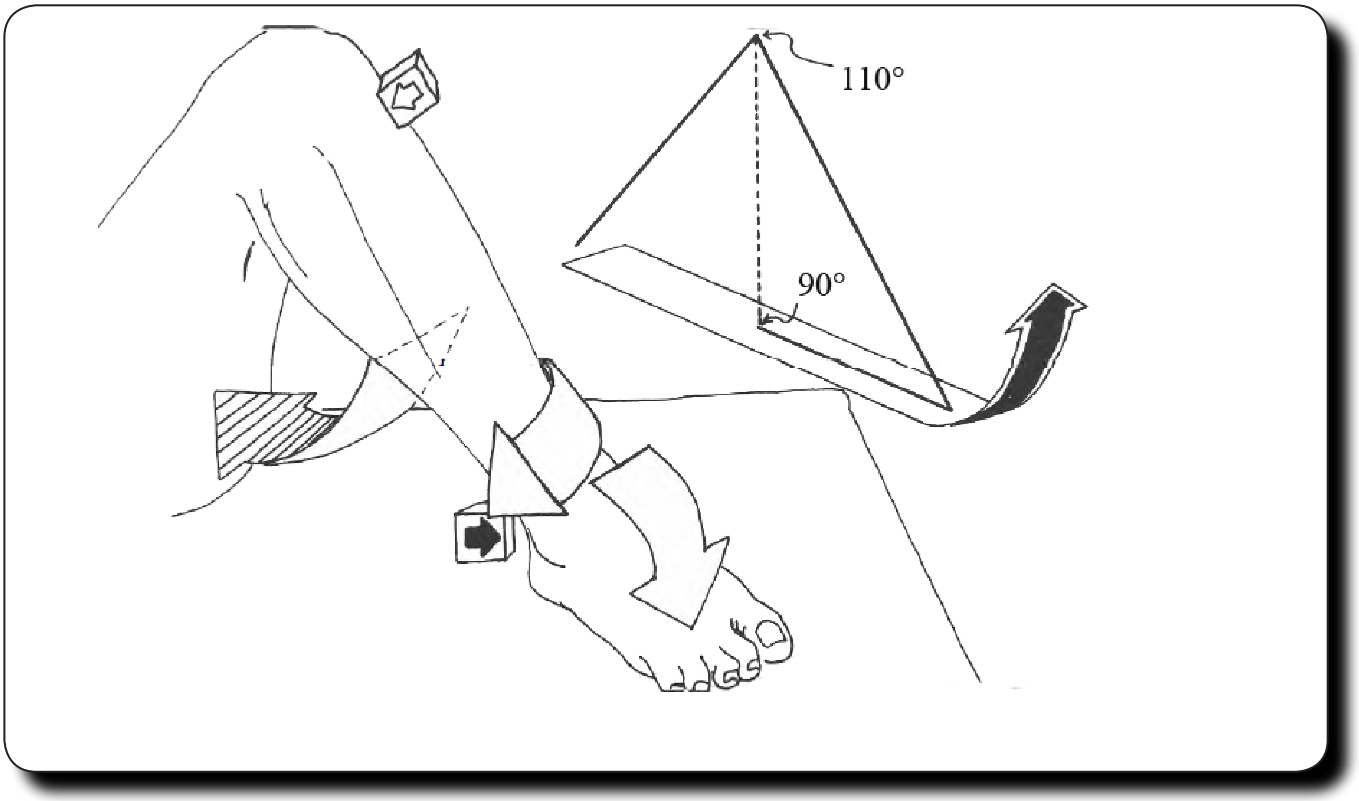
L. B. V.L. : T2 L

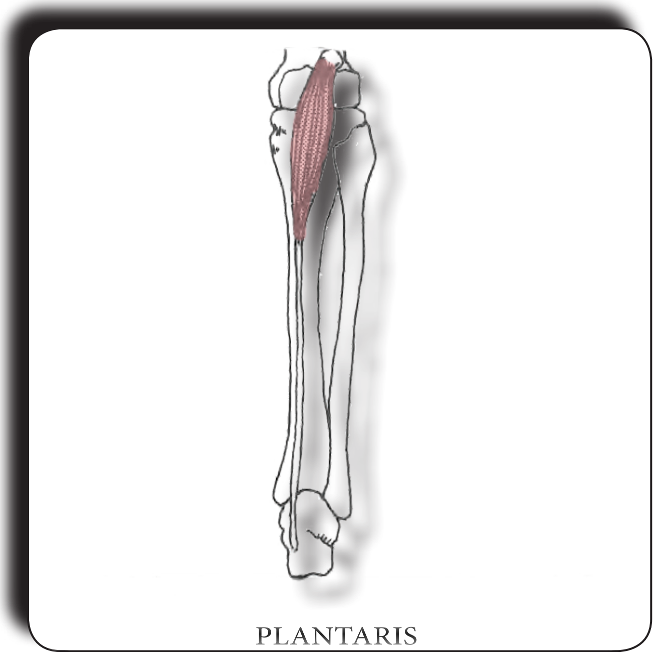
M. M. : S2

CRANIAL: Occiput

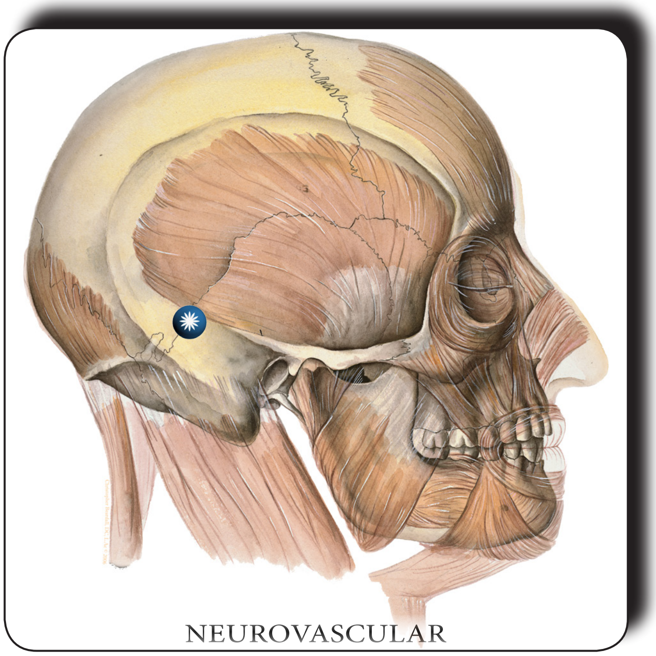
FOOT: Calcaneus

NUTRIENT SOURCE: Iodine
1. Organic Iodine (S)
2. Core Iodine (N.W.)

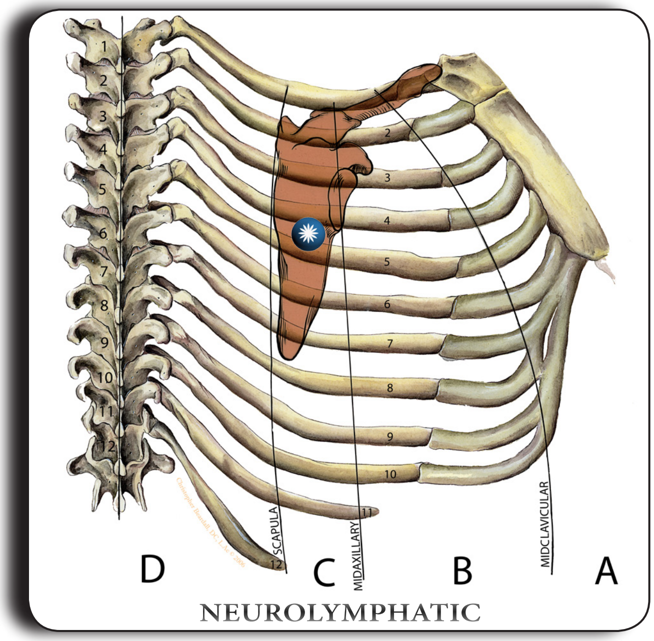




PLANTARIS



NEUROVASCULAR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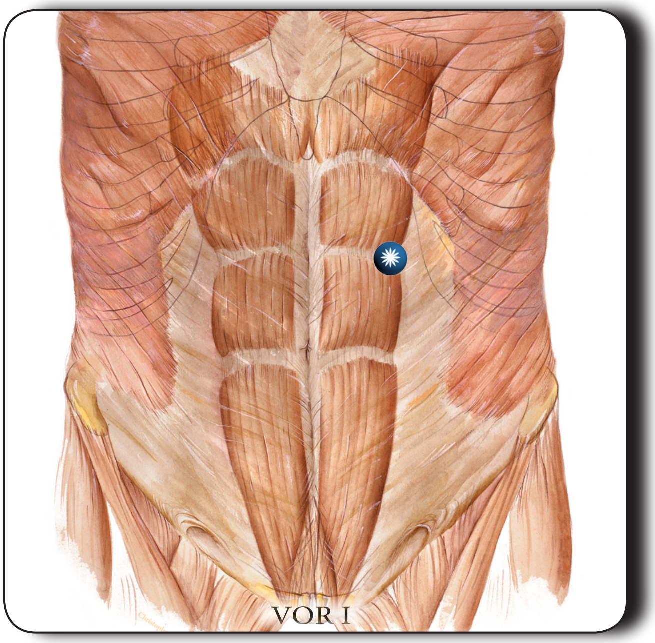
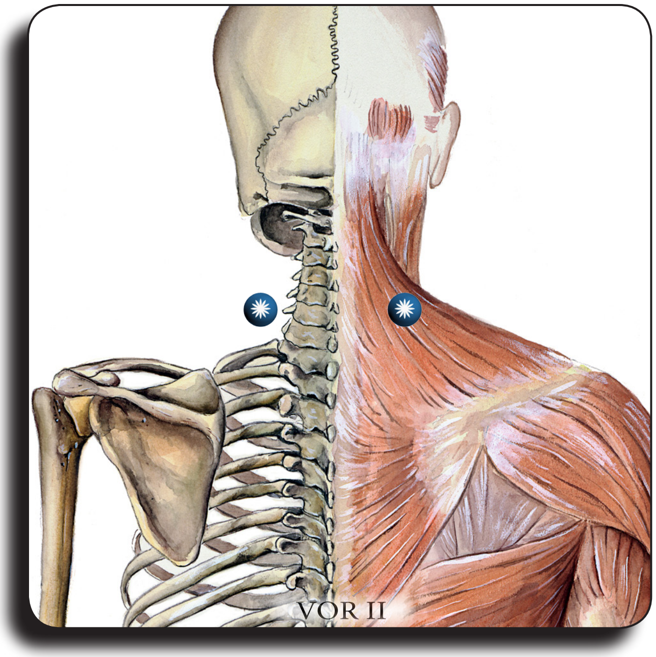
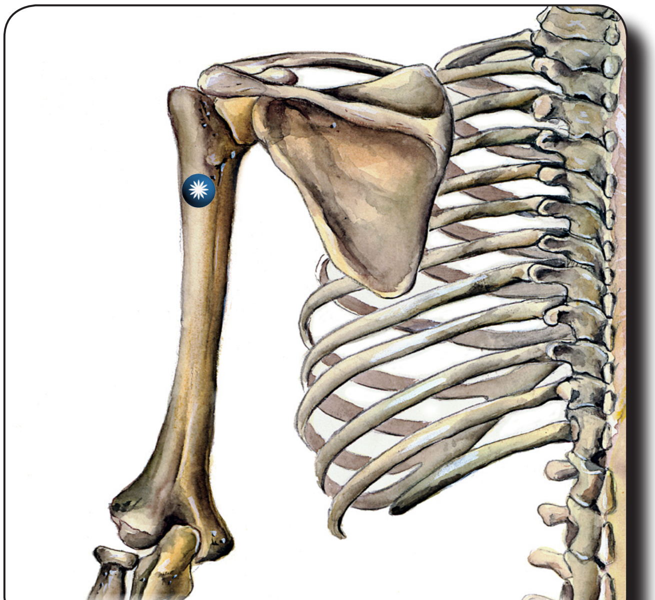
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscel 876: PLANTARIS

ORIGIN: Lower part of the lateral supracondylar line and the oblique popliteal ligament of femur.

INSERTION: Calcaneus, via the calcaneal tendon.

ACTION: With origin fixed, assists in plantar flexion of foot. With insertion fixed, assists in knee flexion.

TEST:

Patient: Position: Supine.
M.T.P.: Flex ipsilateral femur on hip.
Flex ipsilateral calf on femur to 90 degrees.
Internally rotate calf on foot 5 degrees.
Plantar flex foot.

Doctor:
Position: End of table facing patient.
Brace: Ipsilateral knee.
Contact: Ipsilateral calcaneus.
Direction: Extend leg on thigh.

NEUROVASCULAR: (Lat) Squamosal suture, near asterion.
NEUROLYMPHATIC: (Post/R) Fourth I.C.S., parahumeral area.

VISCERAL ORGAN:

I. *Jejunum, Ninth Section:* (Ant/L) Rectus abdominis, lateral border, between second and third sections.

II. *Tonsillar Lymphatics:* (Post/BL) T 15.5; lateral aspect of neck at level of C5 (in upper trapezius belly).

M. A. P. : T 13

V.L. : L4 L

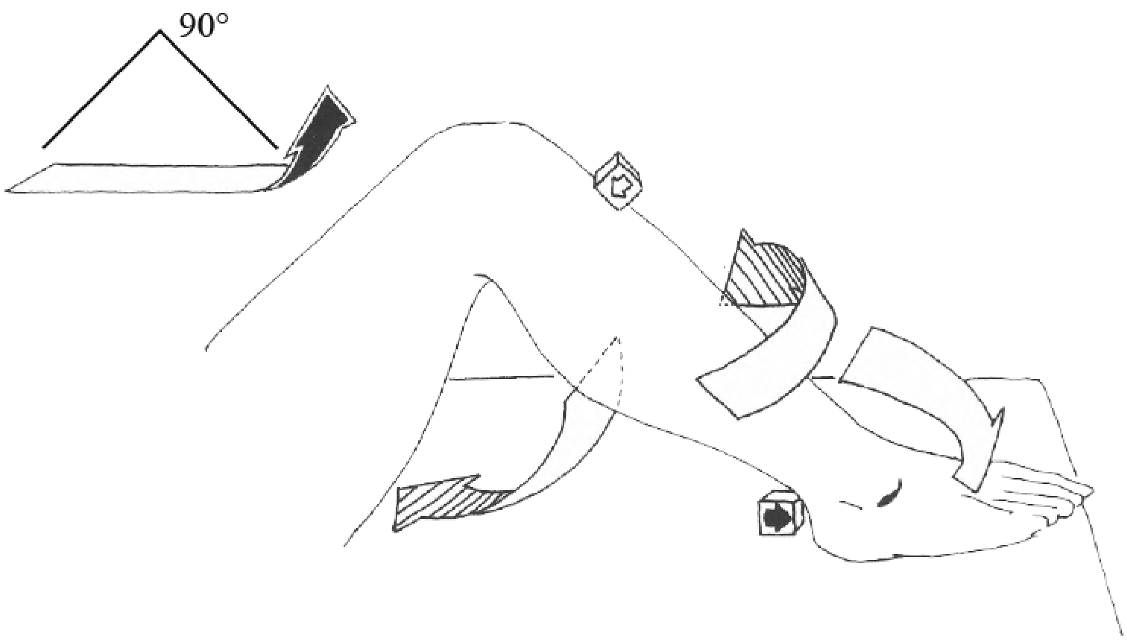
L. B. V.L. : C2 L

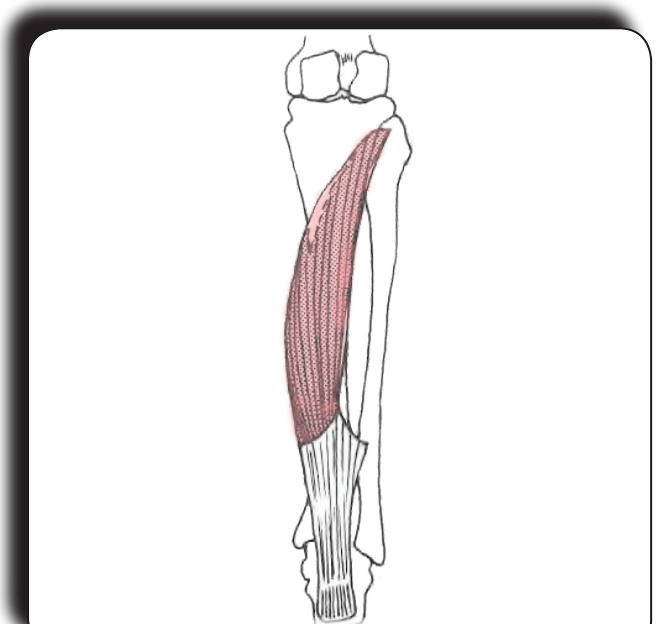
M. M. : S1

CRANIAL: Zygomatic

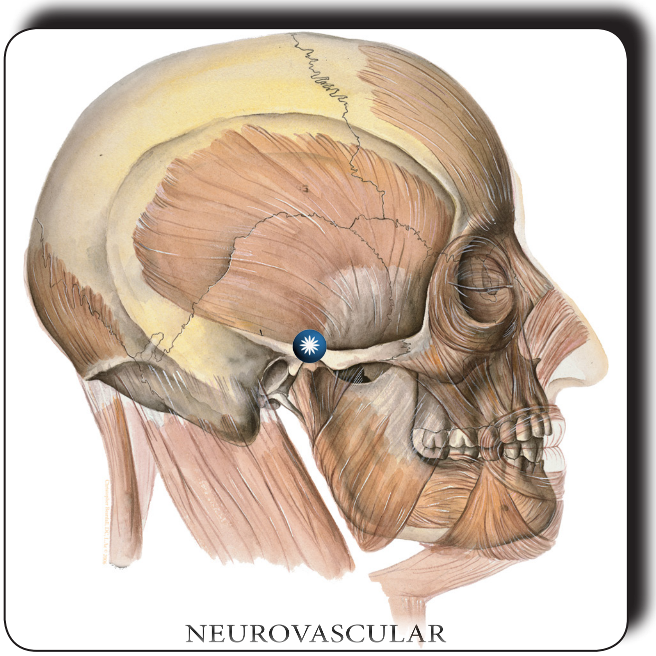
FOOT: Second Cuneiform

NUTRIENT SOURCE: Magnesium
1. Min-Tran (s)
2. Core Magnesium (N.W.)
3. Aspartic-Mag. (N.W.)

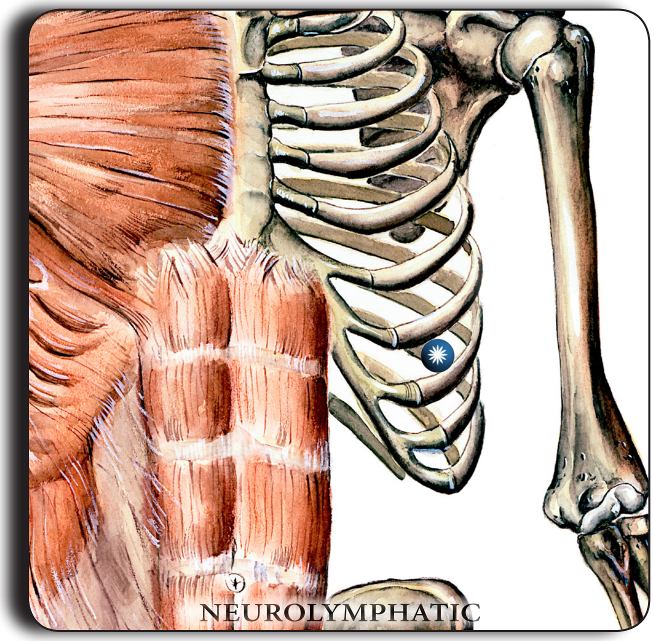




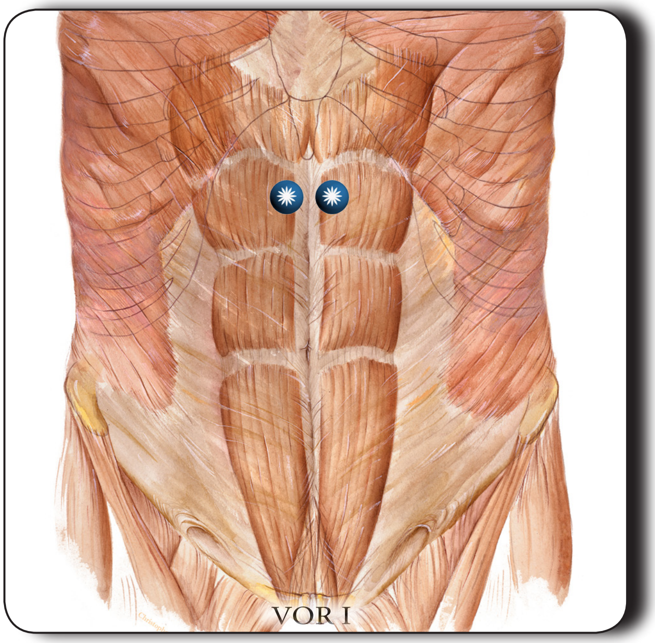
SOLEUS (MEDIAL HEAD)



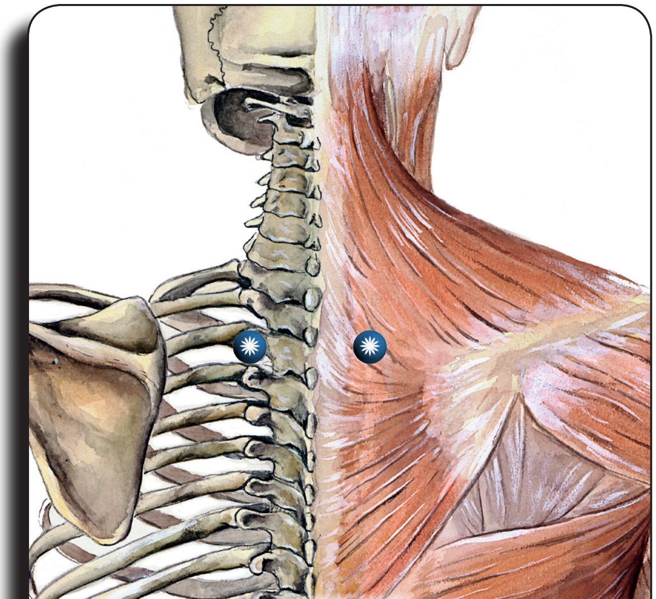
NEUROVASCULAR



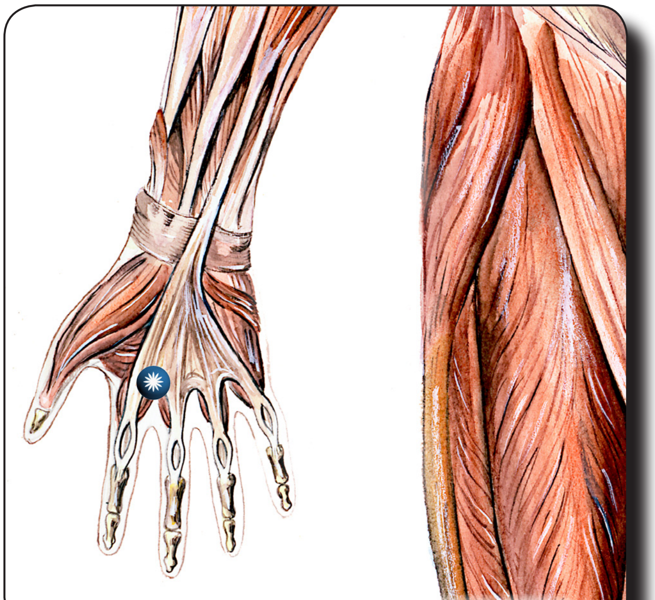
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscel 878: SOLEUS, (Medial Head)

ORIGIN: Transverse processes of atlas and axis vertebrae.

INSERTION: Vertebral border at superior angle of scapula.

ACTION: Raises the scapula, draws it medially and rotates it to lower the lateral angle.

TEST:

No known practical test available. Therapy localize over muscle. See illustration.

NEUROVASCULAR: (Lat) Temporal bone, zygomatic process, anterior to external auditory canal.

NEUROLYMPHATIC: (Ant/L) Seventh I.C.S., l" lateral to costal cartilage junction..

VISCERAL ORGAN:

I. *Adrenal:* (Ant/BL) Rectus abdominis, third section, medial border.

II. *Anterior Pituitary:* (Post/BL) B 12; transverse process of T3.

M. A. P. : Cx 8 (

V.L. : T3 R

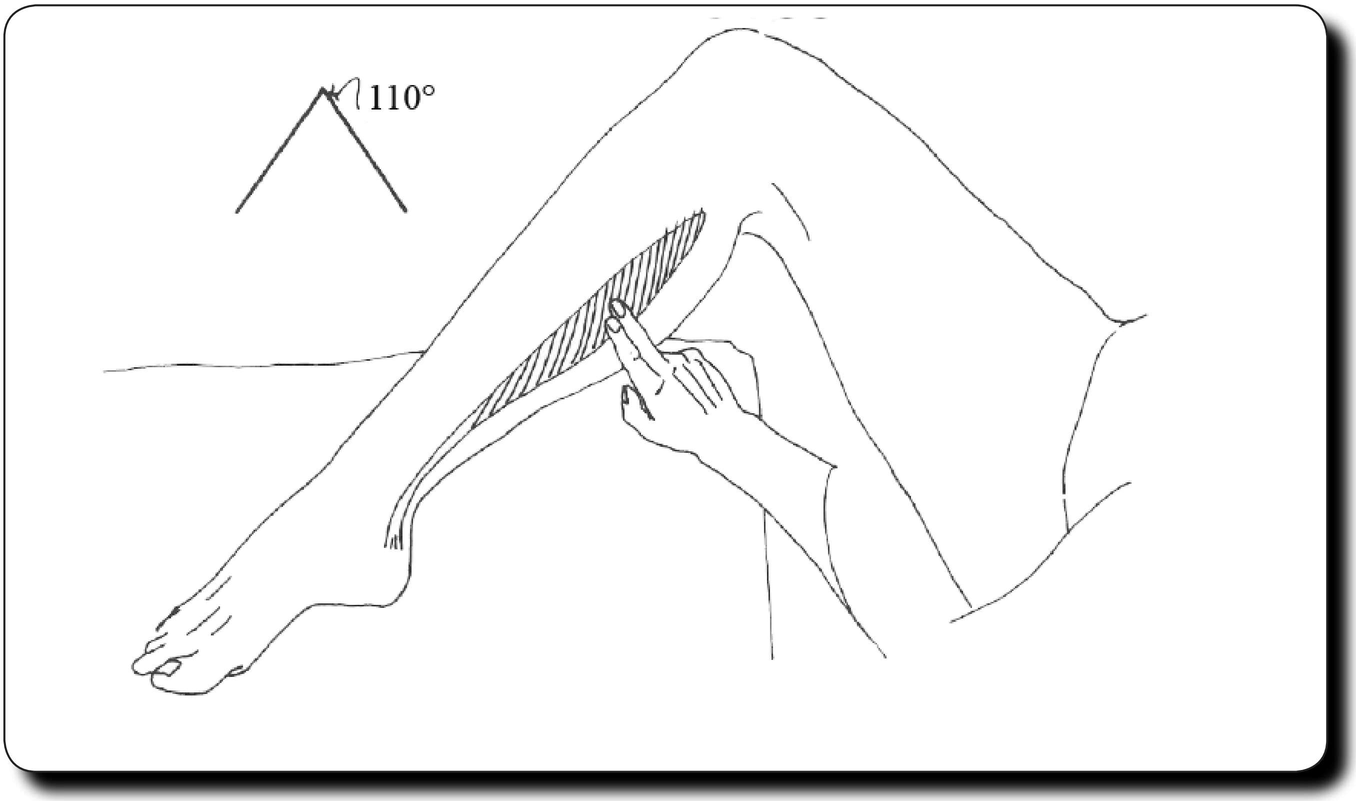
L. B. V.L. : T8 R

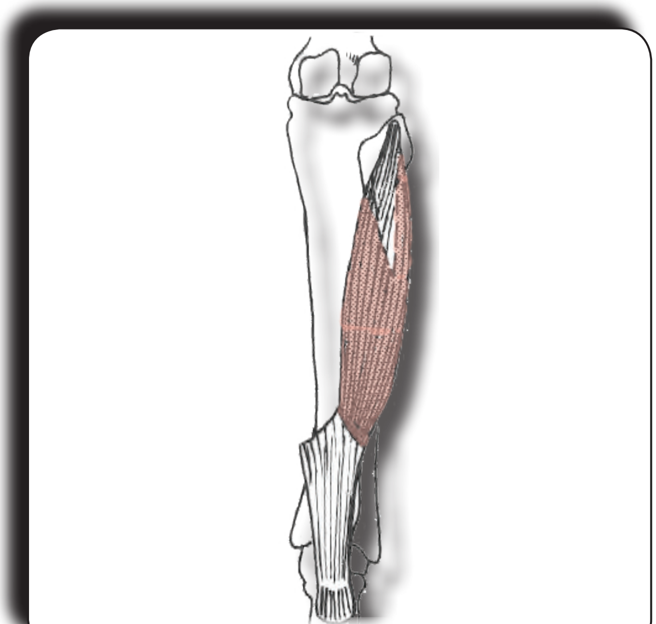
M. M. : S2

CRANIAL: Frontal

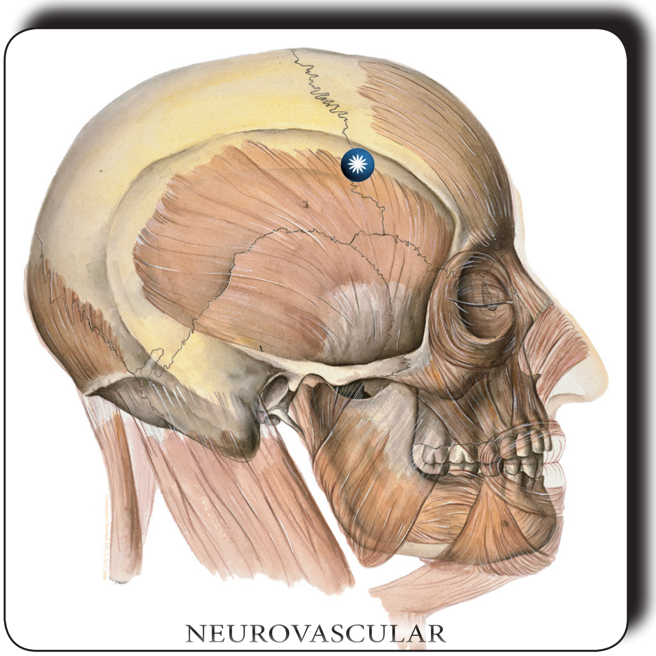
FOOT: Navicular

NUTRIENT SOURCE: Rutin
1. Cyruta (S)
2. Collagen (S)
3. Core Rutin (N.W.)

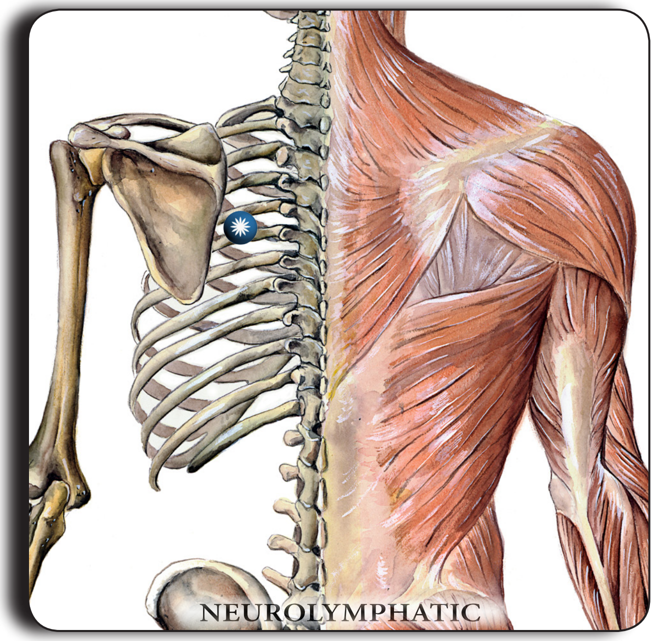




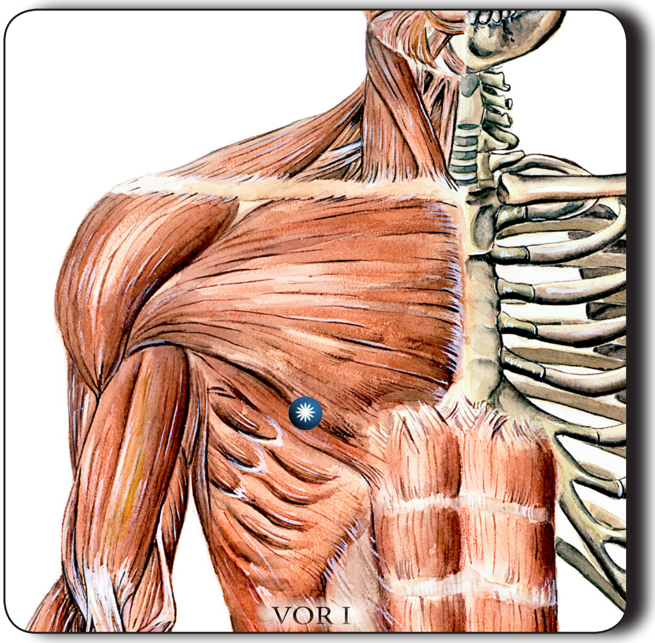
SOLEUS (LATERAL HEAD)



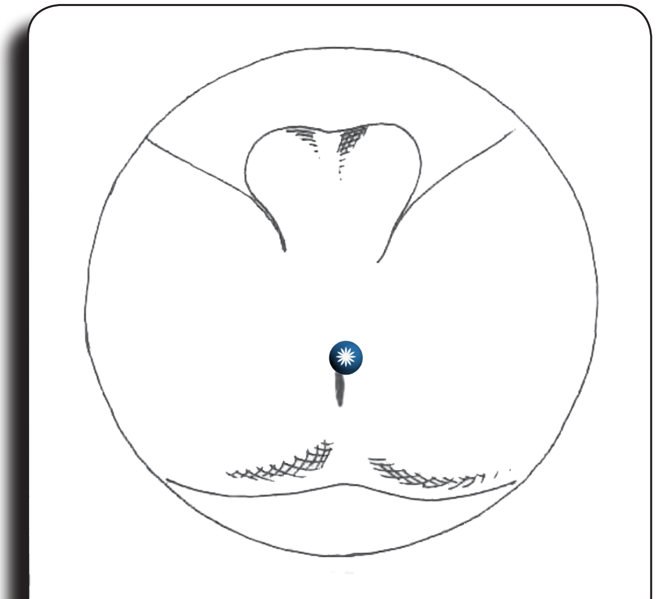
NEUROVASCULAR



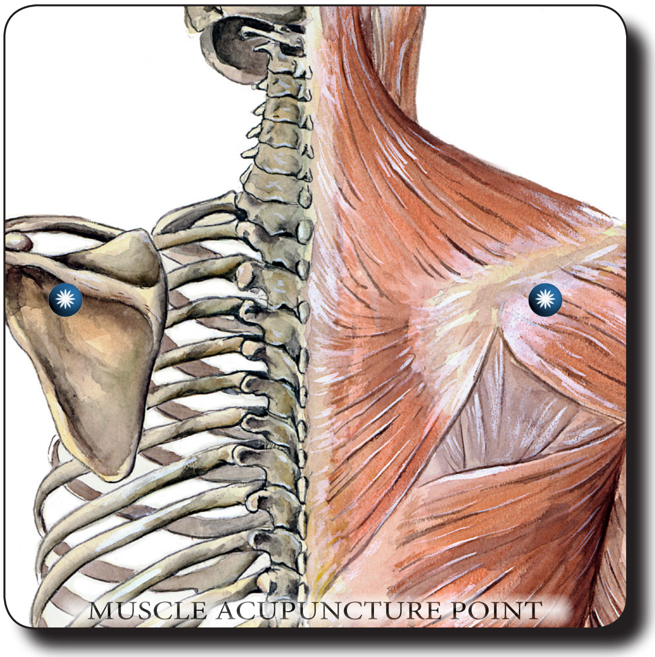
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscel 880: SOLEUS,
(Lateral Head)

ORIGIN: Posterior surface of head of the upper 1/3 of fibular shaft.

INSERTION: Calcaneus via the calcaneal tendon.

ACTION: Plantar flexes foot.

TEST:

No known practical test available. Therapy localize over muscle. See illustration.

NEUROVASCULAR: (Lat) Coronal suture, at superior temporal line.

NEUROLYMPHATIC: (Post/L) Fifth I.C.S., 3" lateral to spine.

VISCERAL ORGAN:

I. *Liver:* (Ant/R) Junction of sixth rib and costal cartilage.

II. *External Rectal Sphincter:* (Inf) Rectal anus, 1 o'clock (with reference to supine position of body).

M. A. P. : Si 11 3/4

V.L. : T9 L

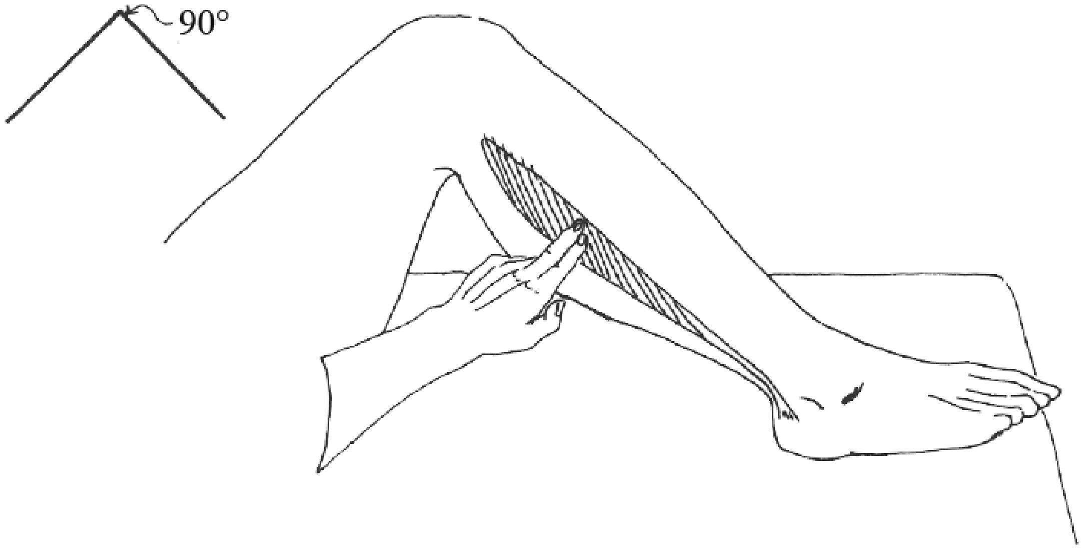
L. B. V.L. : T2 L

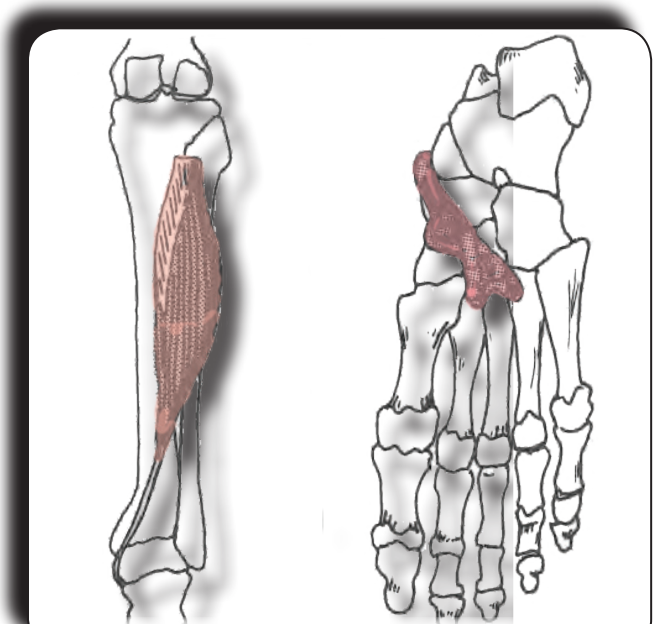
M. M. : S2

CRANIAL: Frontal

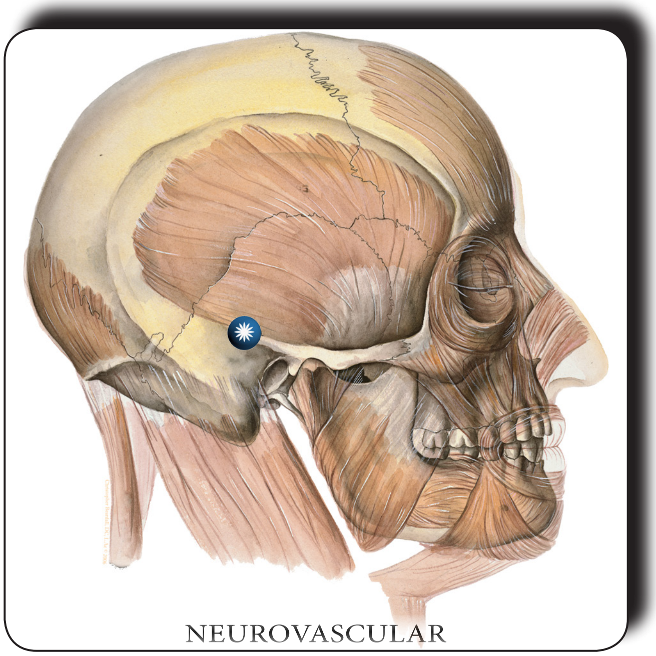
FOOT: Navicular

NUTRIENT SOURCE: Paraminobenzoic acid
1. Nutri-Comp (N.W.)

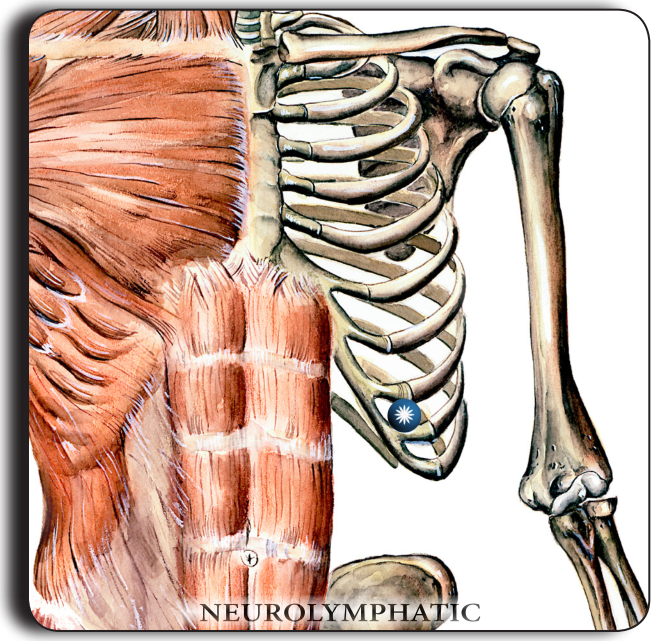




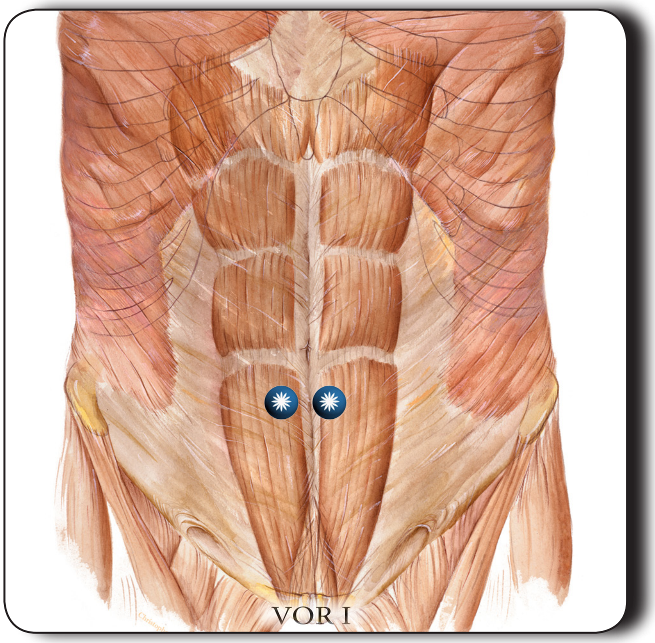
TIBIALIS POSTERIOR, TIBIAL DIVISON



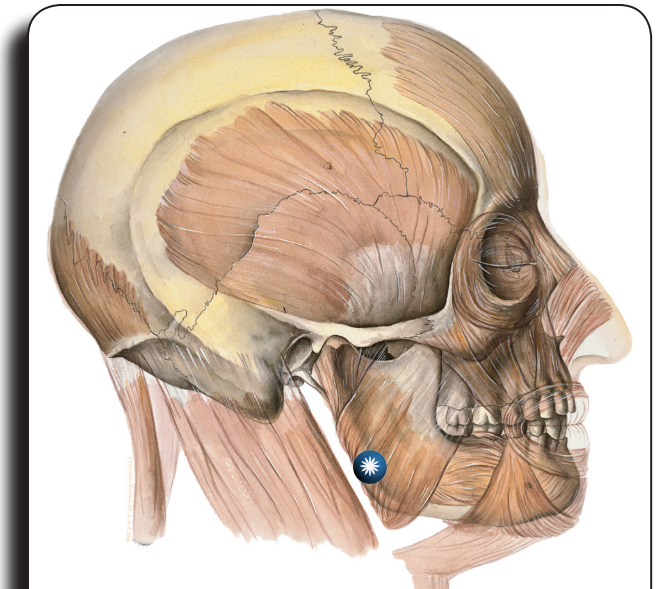
NEUROVASCULAR



NEUROLYMPHATIC



VOR I



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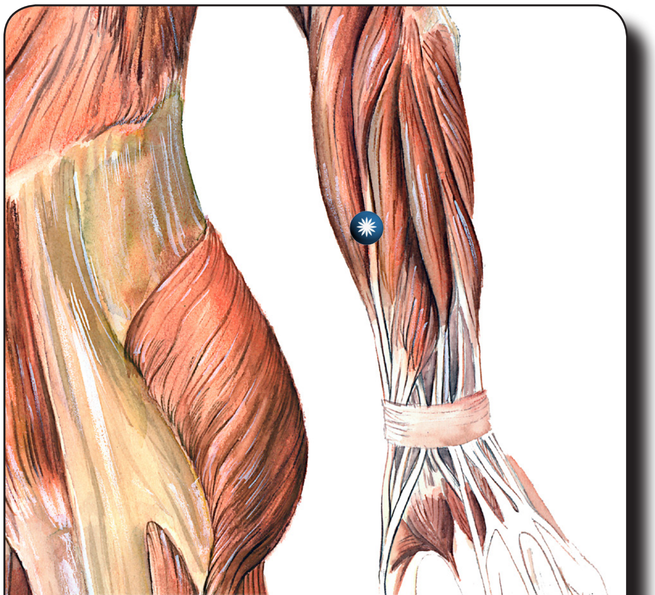


MUSCLE ACUPUNCTURE POINT

Muscel 882: TIBIALIS POSTERIOR, (Tibial Division)

ORIGIN: Posterior proximal lateral aspect of tibia.

INSERTION: Cuboid, second and third cuneiform, base of second, third and fourth metatarsal bones.

ACTION: Plantar flexes and adducts foot.

TEST:

Patient: Position: Supine.
M.T.P.: Plantar flex and adduct foot completely.

Doctor:
Position: End of table facing patient.
Brace: Ipsilateral lateral aspect of calcaneus.
Contact: Medial aspect of longitudinal arch.
Direction: Abduct foot through coronal plane.

NEUROVASCULAR: (Lat) Temporal bone, 1” superior and 1” posterior to external auditory canal.

NEUROLYMPHATIC: (Ant/L) Eighth I.C.S., at nipple line.

VISCERAL ORGAN:

I. *Ileum, Fifth Section:* (Ant/BL) Rectus abdominis, first section, medial border.

II. *Pancreas:* (Lat/BL) S6; mandible, at insertion of masseter.

M. A. P. : Li 7 3/4

V.L. : C3 L

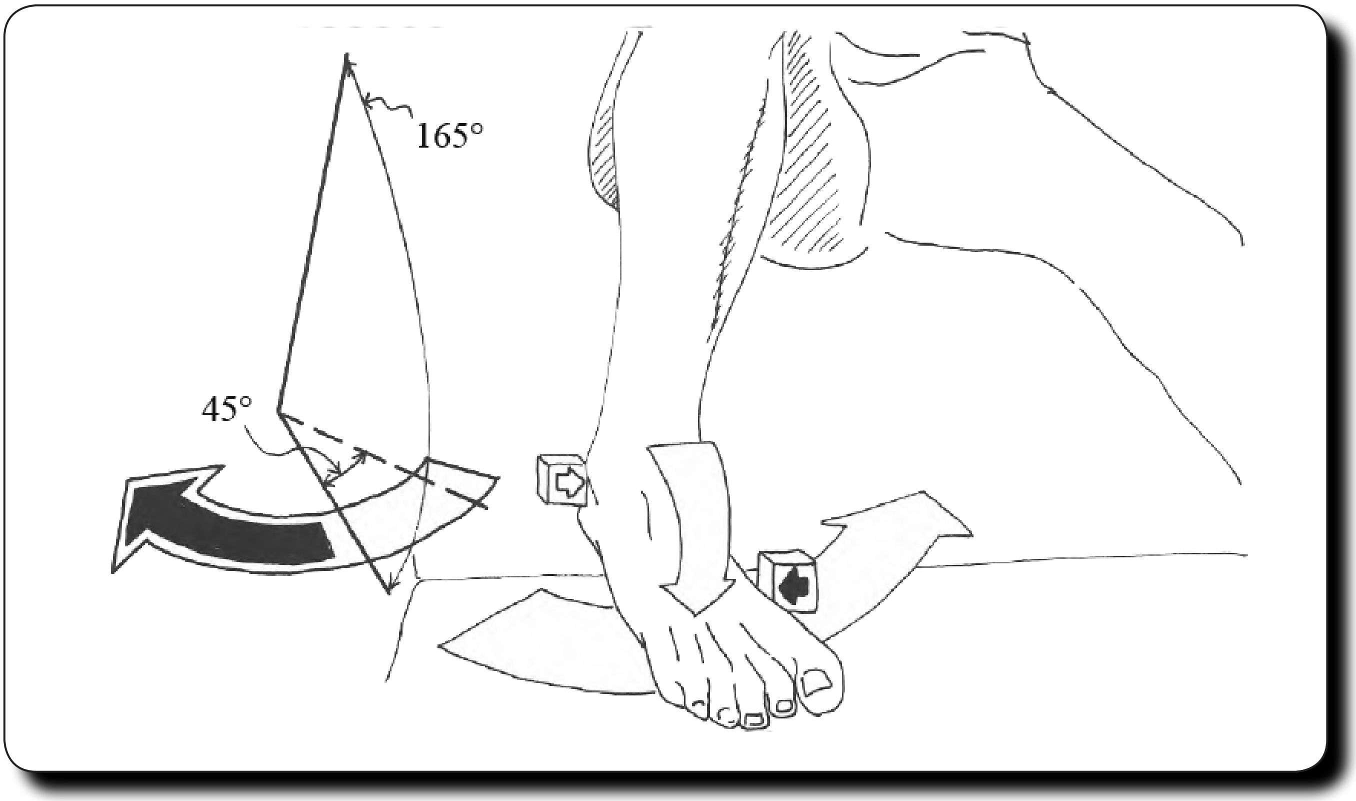
L. B. V.L. : L3 L

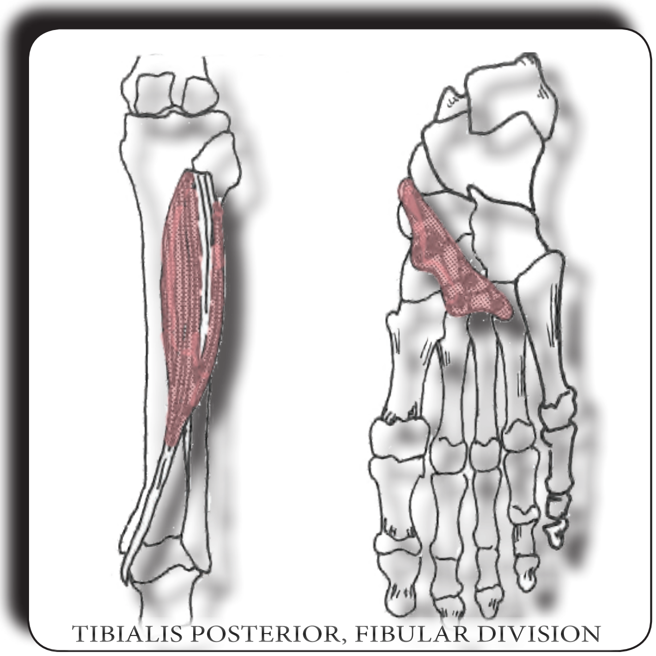
M. M. : L5

CRANIAL: Parietal

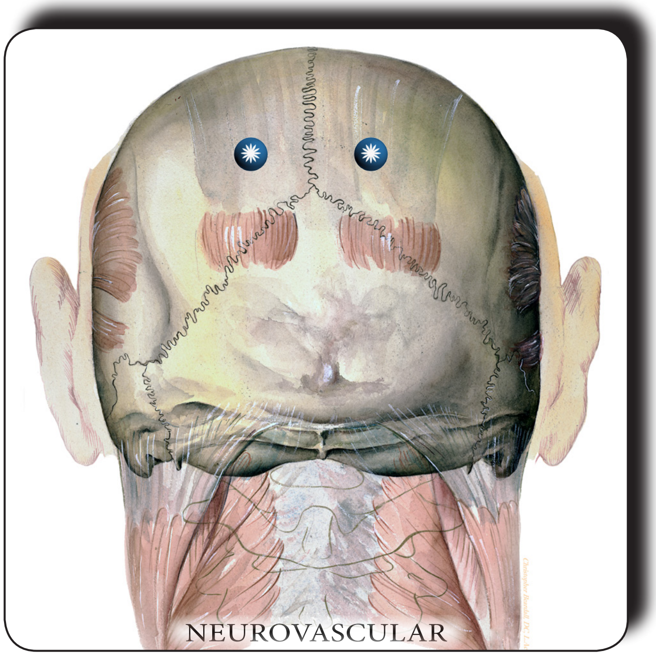
FOOT: Talus

NUTRIENT SOURCE: Zinc
1. Chezyn (S)
2. Core Zinc (N.W.)

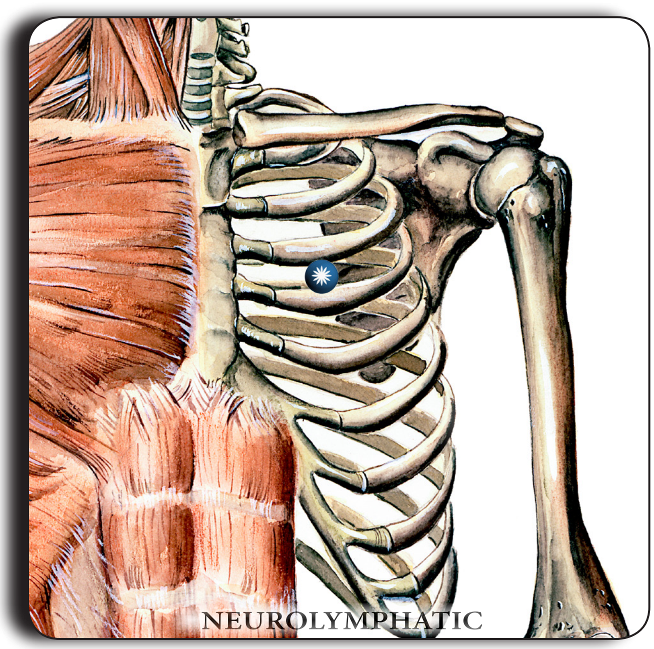




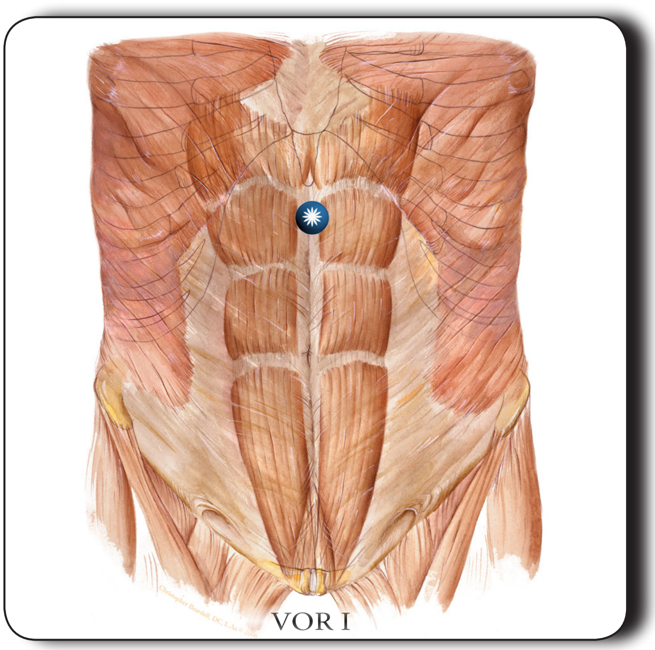
TIBIALIS POSTERIOR, FIBULAR DIVISION



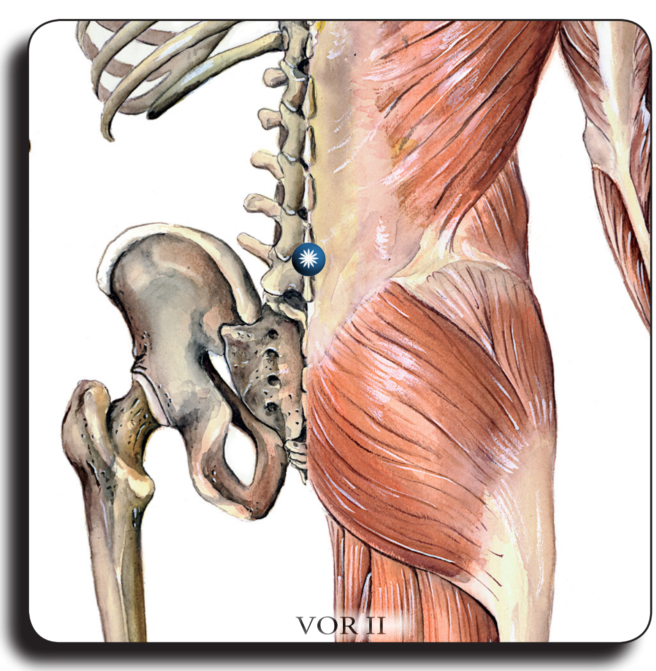
NEUROVASCULAR



NEUROLYMPHATIC



VOR I



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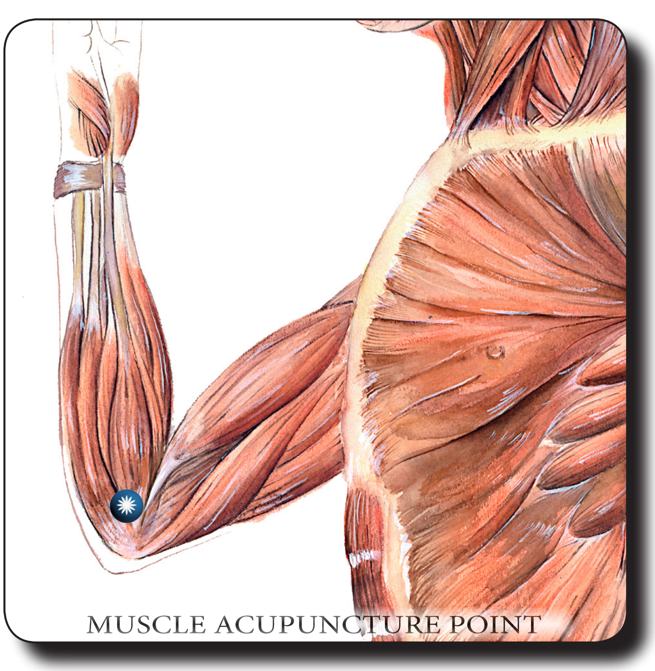


MUSCLE ACUPUNCTURE POINT

Muscle 884: TIBIALIS POSTERIOR, (Fibular Division)

ORIGIN: Posterior proximal medial surface of fibula and interosseous membrane.

INSERTION: Tuberosity of navicular and inferior surfaces of medial cuneiform.

ACTION: Principle supinator of foot in plantar flexion.

TEST:

Patient: Position: Supine.
M.T.P.: Completely plantar flex (approximately 145 degrees) adduct (approximately 45 degrees), and then supinate foot. Keep toes in neutral position.
Doctor:
Position: End of table facing patient.
Brace: Ipsilateral lateral aspect of calcaneus.
Contact: Medial aspect of longitudinal arch.
Direction: Abduct foot through coronal plane.

NEUROVASCULAR: (Post/BL) Parietal bone, 1" lateral to sagittal suture, 2 to 2 1/2" anterior to posterior fontanelle.

NEUROLYMPHATIC: (Ant/L) Third I.C.S., 3-4" lateral to sternum, near nipple line.

VISCERAL ORGAN:

I. *Heart:* (Ant/Midline) Cv 13; between umbilicus and xiphoid.

II. *Testicle/Ovaries:* (Post/Midline) Gv 3; between L4 and L5 spinous processes.

M. A. P. : H 3

V.L. : T7 R

L. B. V.L. : T4 R

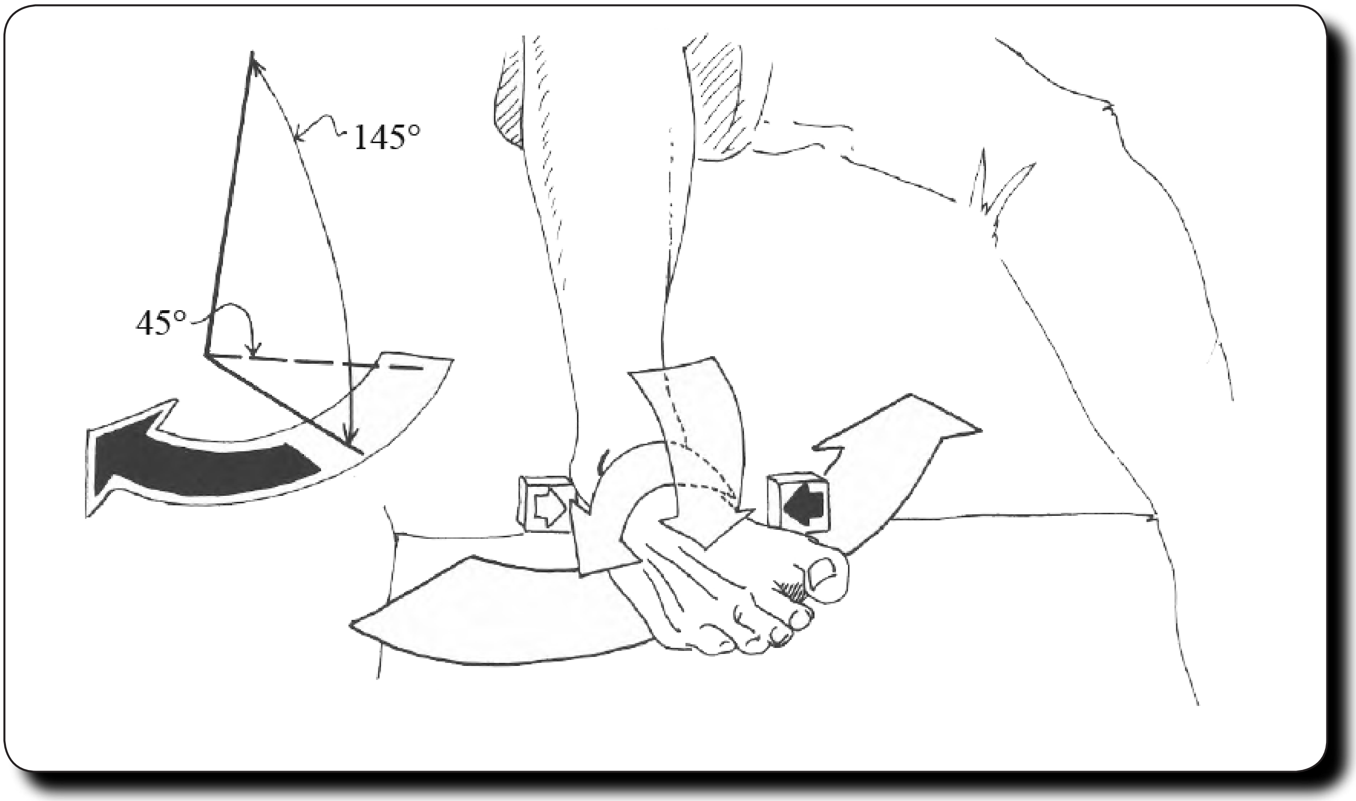
M. M. : L5

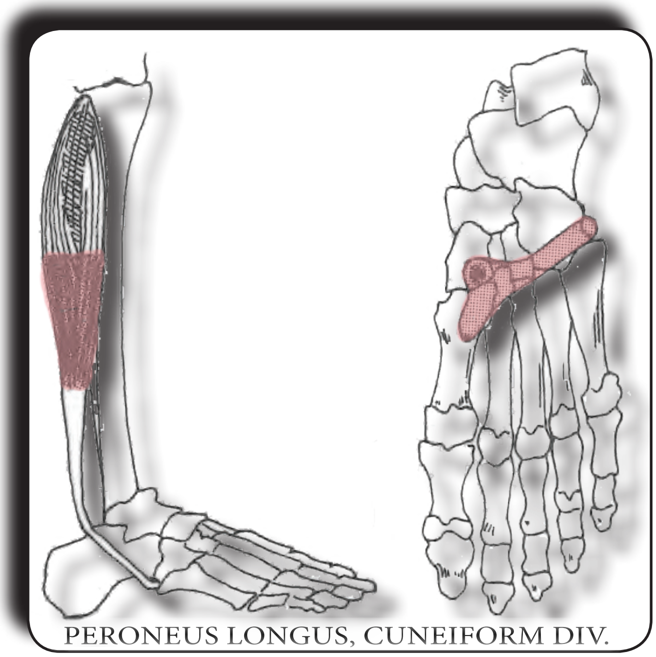
CRANIAL: Sphenoid

FOOT: Third Cuneiform

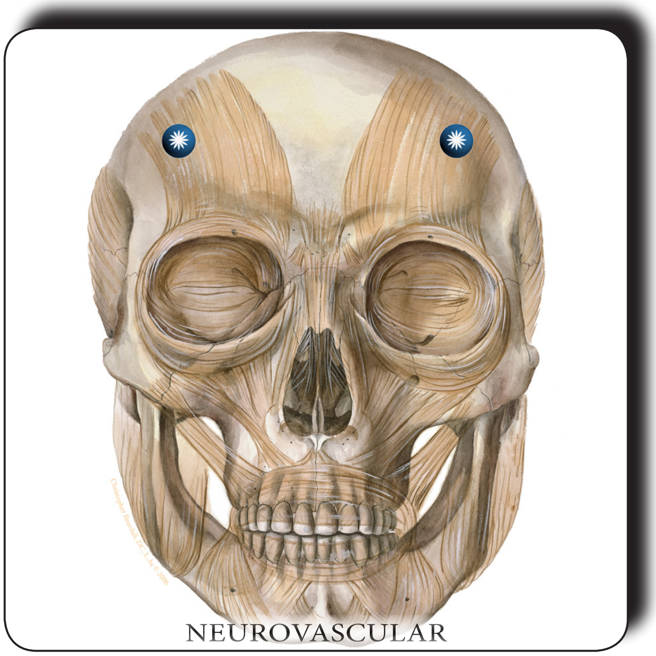
NUTRIENT SOURCE: Potassium

1. Core Potassium (N.W.)
2. Aspartic K (N.W.)
3. Organic Minerals (S)

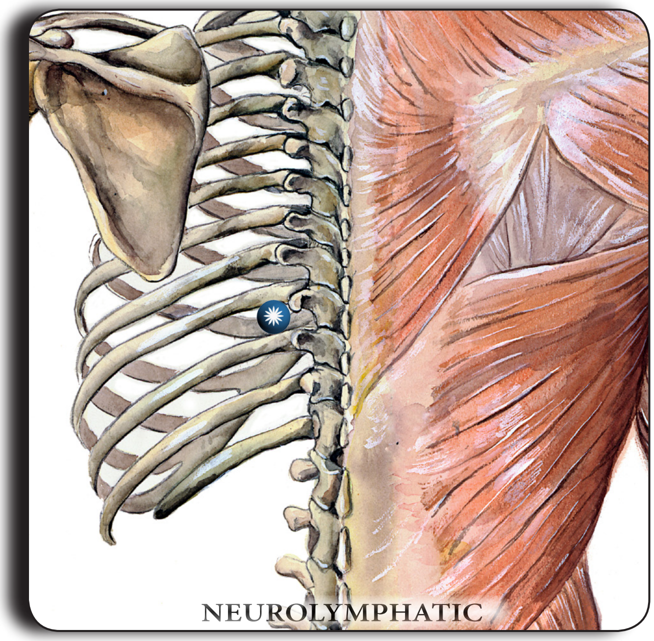




PERONEUS LONGUS, CUNEIFORM DIV.



NEUROVASCULAR



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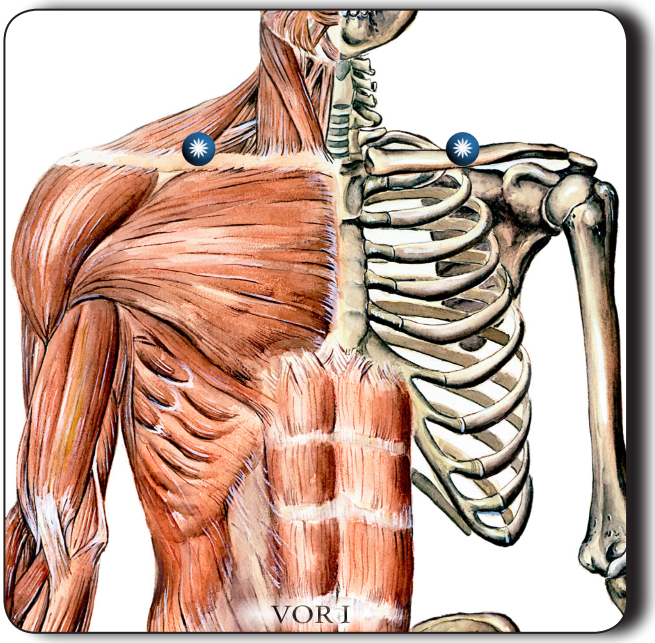
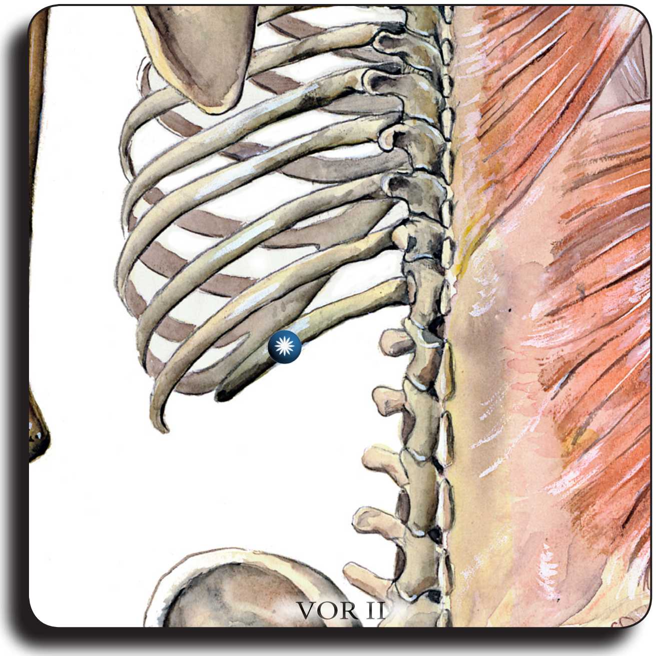
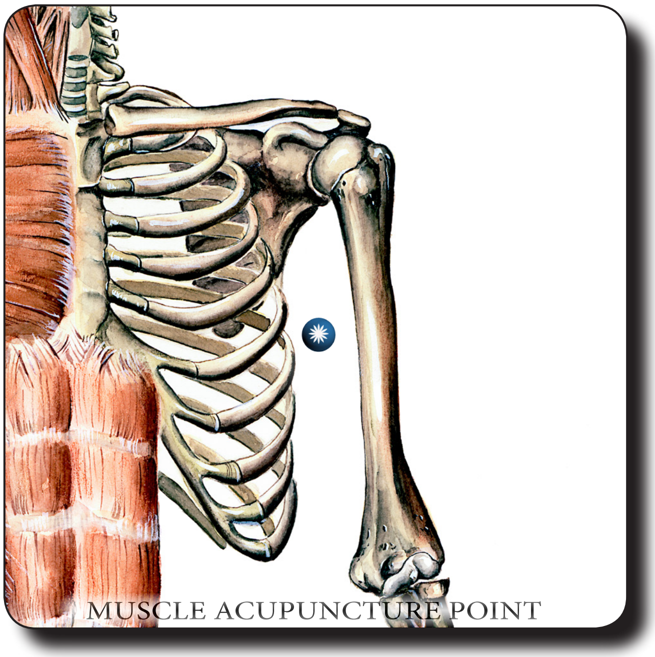


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 886: PERONEUS LONGUS, (Cuneiform Division)

ORIGIN: (Lower Fibers of Origin) Upper 2/3 of the lateral surface of the body of the fibula.

INSERTION: Lateral side of the first cuneiform.

ACTION: Externally rotates, abducts and plantar flexes the foot.

TEST:

Patient: Position: Supine.
M.T.P.: Completely plantar flex (approximately 165 degrees) abduct (approximately 28 degrees) and evert the foot. Keep toes in neutral position
Doctor:
Position: At end of table facing patient.
Brace: Ipsilateral medial aspect of calcaneus.
Contact: Lateral aspect of foot near cuboid.
Direction: Invert and adduct the foot.

NEUROVASCULAR: (Ant/BL) Frontal bone, 1" superior and 1" lateral to frontal prominence.

NEUROLYMPHATIC: (Post/L) Ninth I.C.S., at transverse process of vertebra.

VISCERAL ORGAN:

I. *Bladder:* (Ant/BL) S 12; mid-clavicle area.

II. *Duodenum:* (Post/L) B 45; middle of twelfth rib.

M.A.P.: H 1.5

V.L.: T11 R

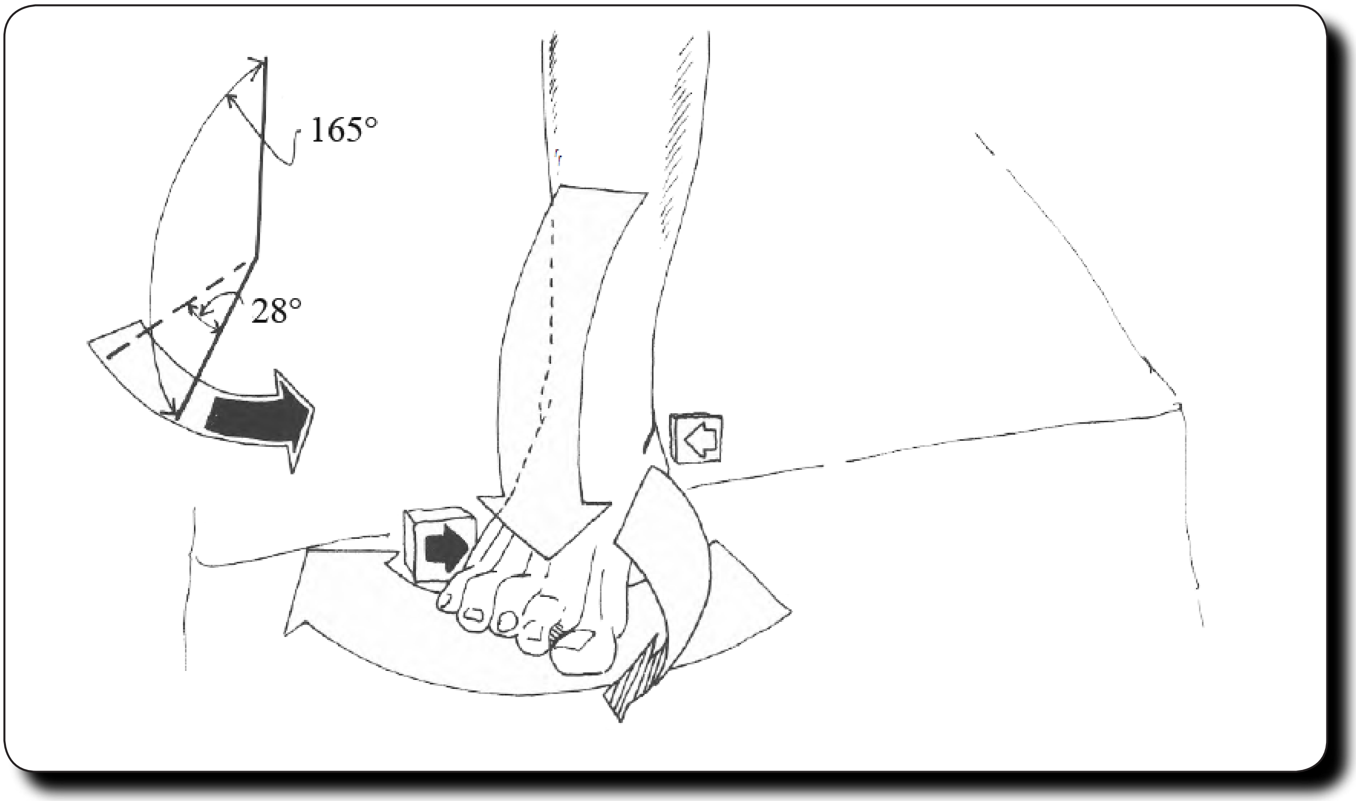
L.B. V.L.: C7 R

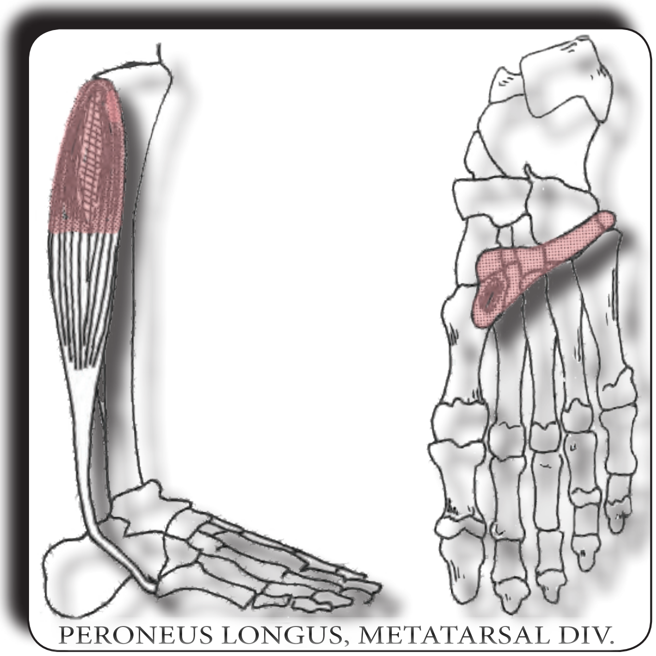
M.M.: L5

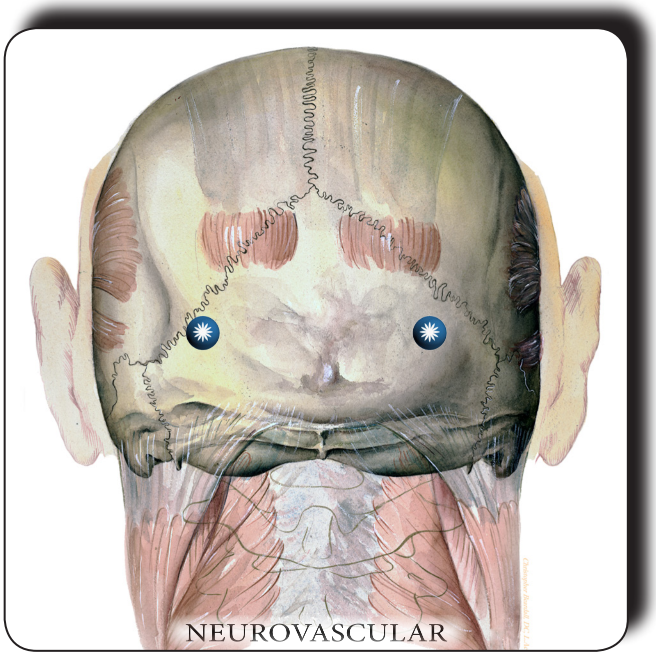
CRANIAL: Ethmoid

FOOT: First Cuneiform

NUTRIENT SOURCE: Phosphorus
1. Core Phosphorus (N.W.)
2. Phos-Tab (N.W.)
3. Phosfood (S)




PERONEUS LONGUS, METATARSAL DIV.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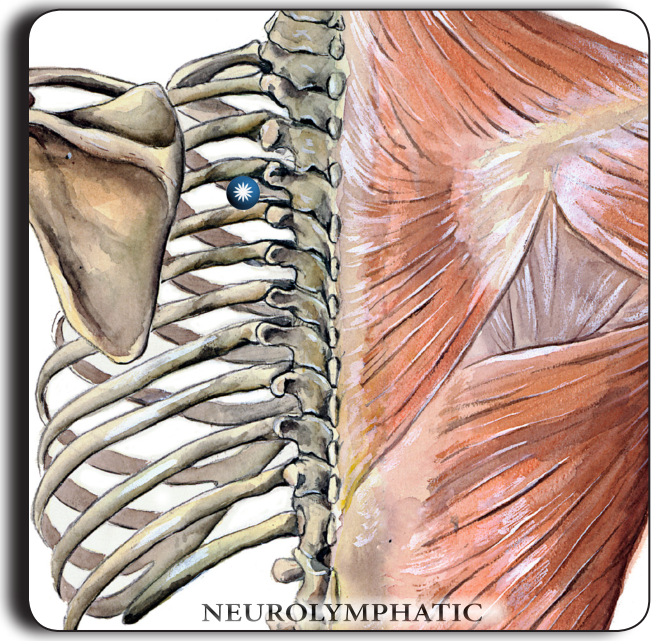
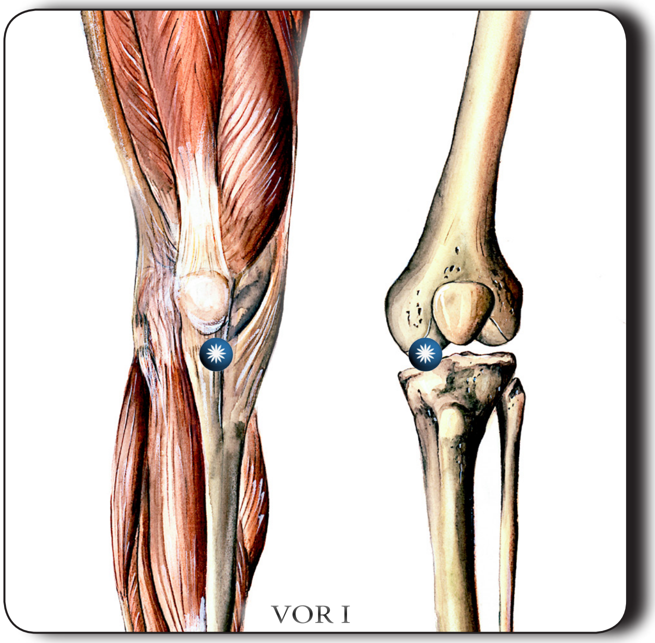
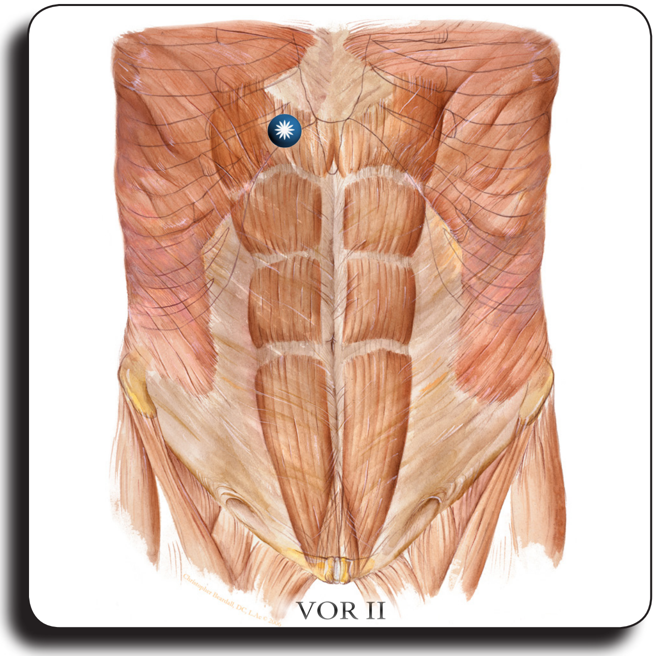
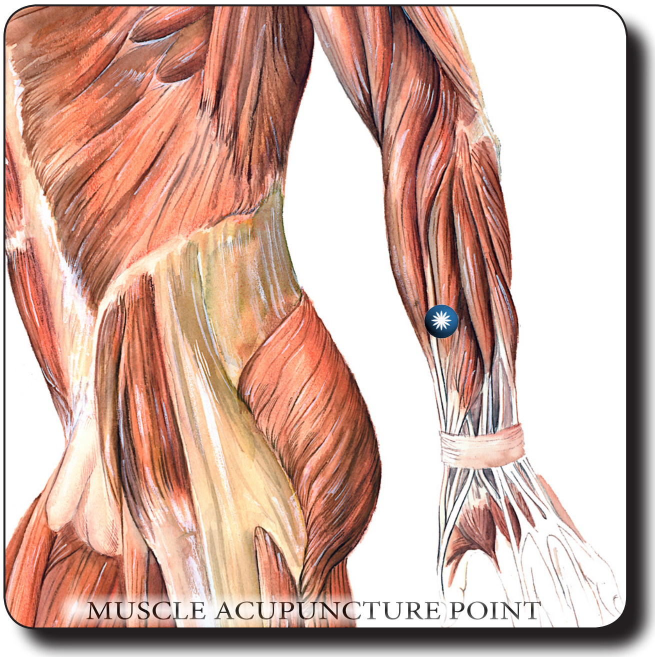

NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 888: PERONEUS LONGUS, (Metatarsal Division)

ORIGIN: Head and upper 2/3 of the lateral surface of the fibula.

INSERTION: Lateral side of the base of the first metatarsal bone.

ACTION: Everts, abducts and plantar flexes the foot. Attachment on first metatarsal acts to maintain longitudinal arch and first metatarsal flexion.

TEST:

Patient: Position: Supine.
M.T.P.: Completely plantar flex, abduct and evert foot. Keep toes in neutral position.
Doctor:
Position: At side of table facing patient's feet.
Brace: Dorsal aspect of foot.
Contact: Plantar surface of first metatarsal bone.
Direction: Dorsiflex first metatarsal.

NOTE: Action of this muscle is most concentrated during the last 10 degrees of metatarsal plantar flexion.

NEUROVASCULAR: (Post/BL)Occiput, just inferior to the middle of the lambdoidal suture.

NEUROLYMPHATIC: (Post/L) Fourth I.C.S., 2" lateral to spine.

VISCERAL ORGAN:

I. *Parathyroid:* (Ant/BL) Patella tendon, just superior to tibial tuberosity, medial side.

II. *Gall Bladder:* (Ant/R) Rectus abdominis, fourth section, 1 1/2" medial to lateral border.

M.A.P.: Li 6 1/2

V.L. : T8 L
L. B. V.L. : T3 L

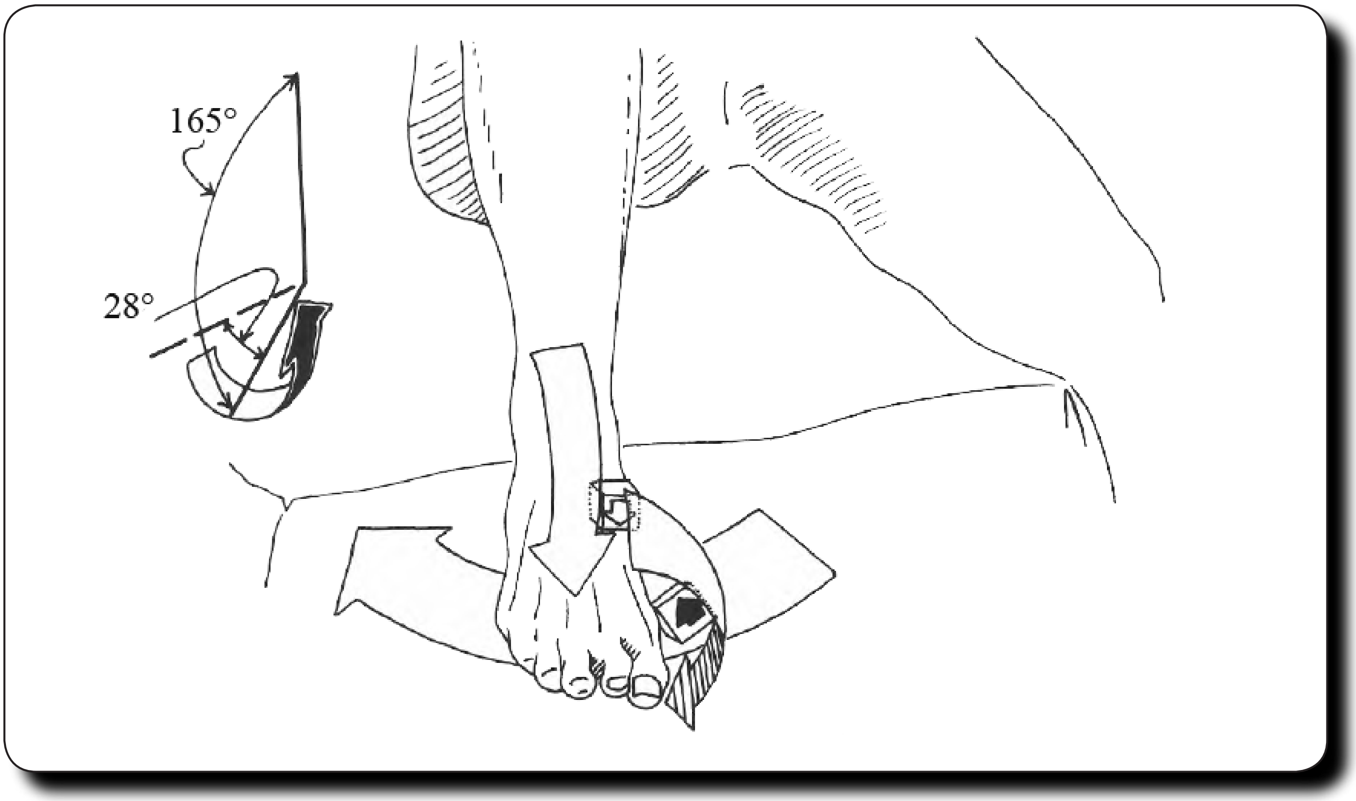
M.N.: S1

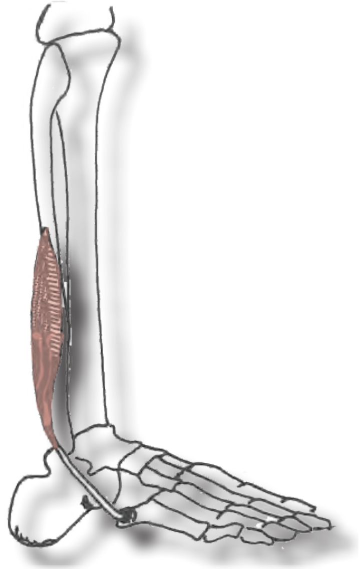
CRANIAL: Parietal

FOOT: Talus

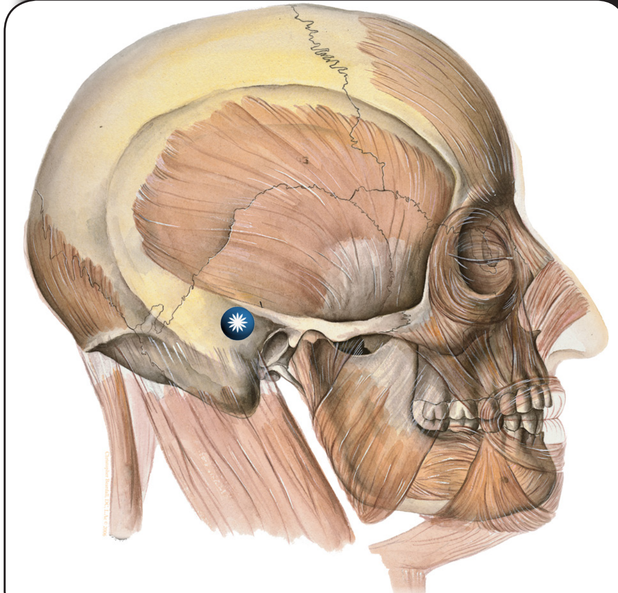
NUTRIENT SOURCE: Manganese

1. Core Manganese (N.W.)
2. Vita Manganese (N.W.)
3. Ligaplex II (S)





PERONEUS BREVIS, FIBULAR DIVISION



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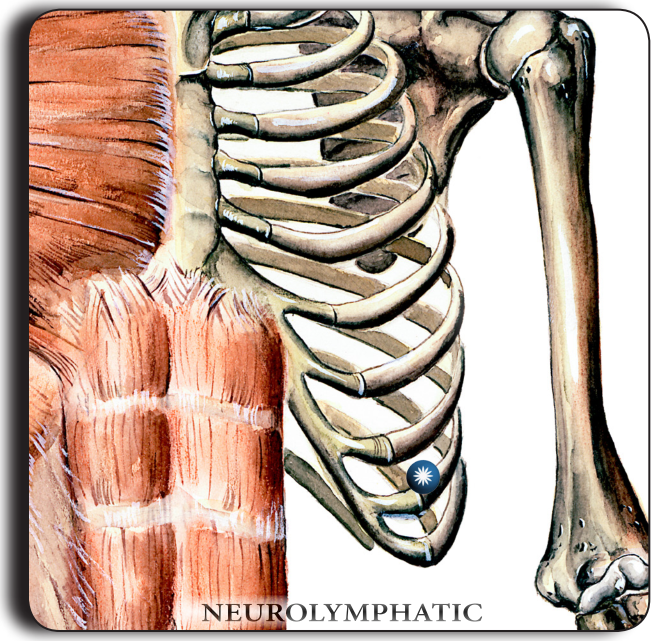
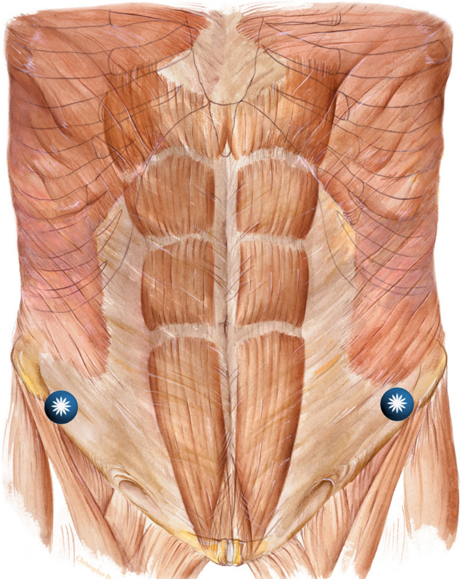
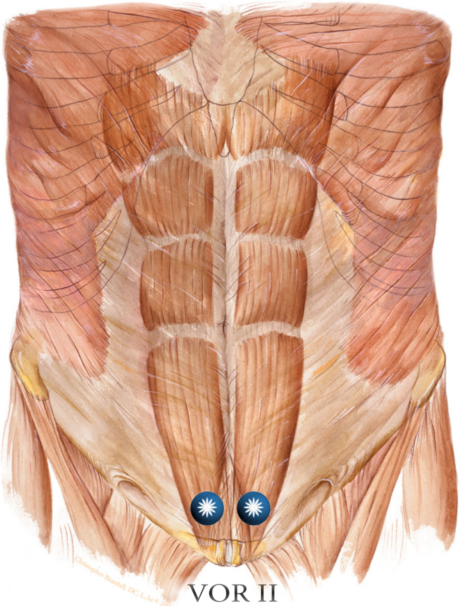


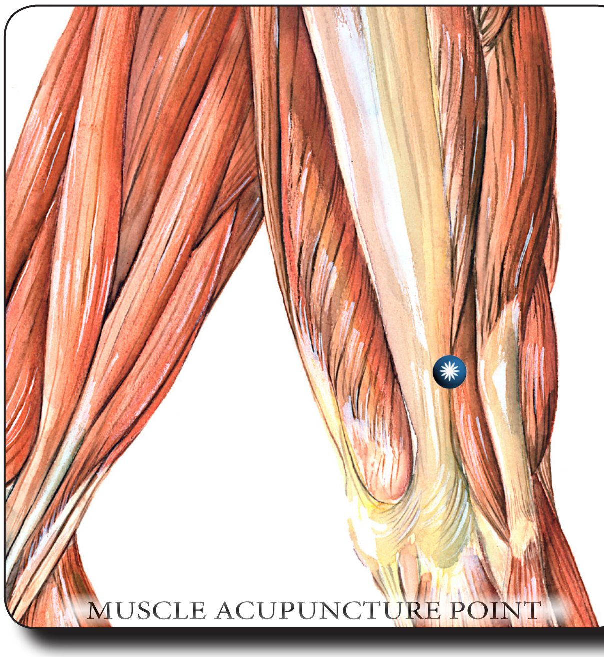
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 890: PERONEUS BREVIS, (Fibular Division)

ORIGIN: Lower lateral 2/3 of fibula.

INSERTION: Tuberosity at the base of the fifth metatarsal bone, lateral aspect.

ACTION: Abducts, everts and plantar flexes the foot.

TEST:

Patient: Position: Supine.
M.T.P.: Plantar flex 115 degrees and abduct foot 15 degrees. Keep toes in neutral position.

Doctor:
Position: At end of table facing patient.
Brace: Ipsilateral medial aspect of calcaneus.
Contact: Lateral aspect of foot.
Direction: Adduct the foot.

NEUROVASCULAR: (Lat) Temporal bone, 1" behind the ear.

NEUROLYMPHATIC: (Ant/L) Eighth I.C.S., humeral area, lateral to mid-clavicular line.

VISCERAL ORGAN:

I. *Lungs:* (Ant/BL) Lv 12.5; inguinal ligament, medial to sartorius origin.

II. *Urethra, Membranous Portions:* (Ant/BL) K 12; Rectus abdominis, first section, 1" superior and 1" lateral to pubes.

M. A. P. : G 32 1/3

V.L. : T11 L

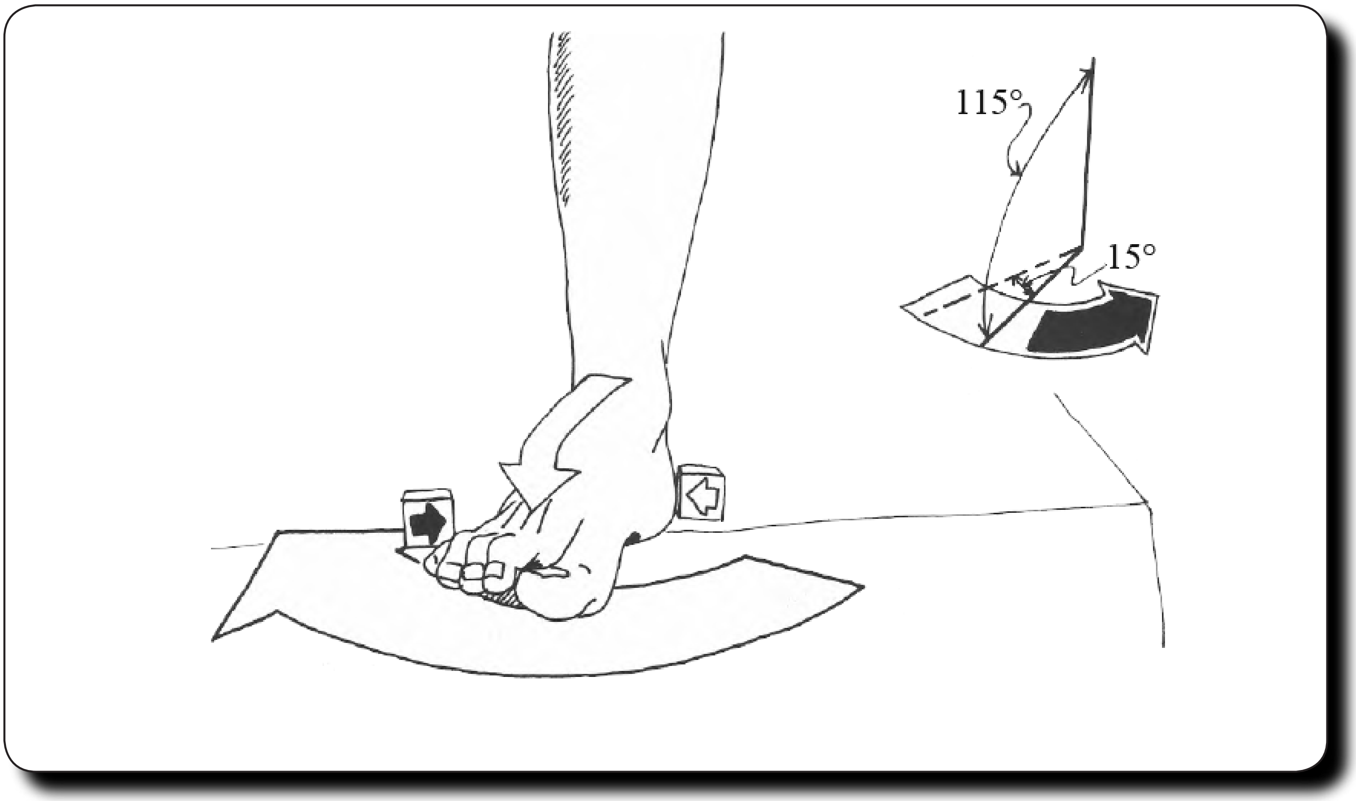
L. B. V.L. : C7 L

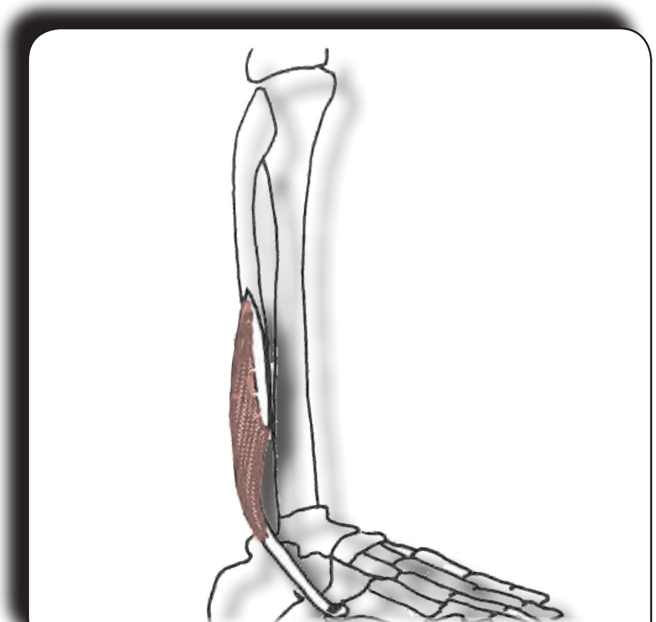
M. M. : L5

CRANIAL: Parietal

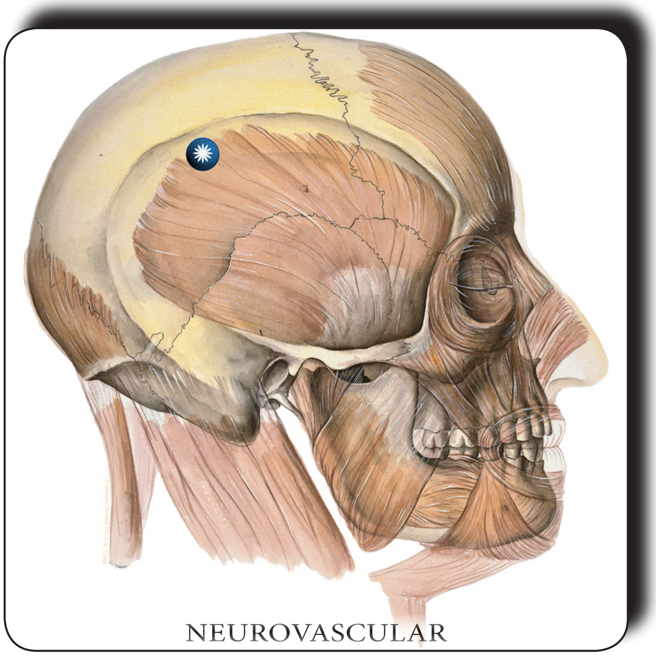
FOOT: Talus

NUTRIENT SOURCE: Iron
1. Ferrofood (S)
2. Core Iron (N.W.)
3. Fe Chelate (N.W.)

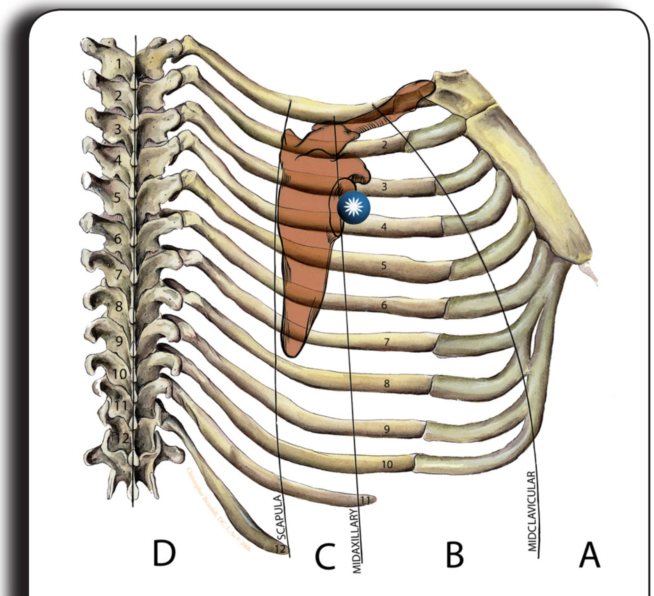




PERONUS BREVIS, SEPTAL DIVISION



NEUROVASCULAR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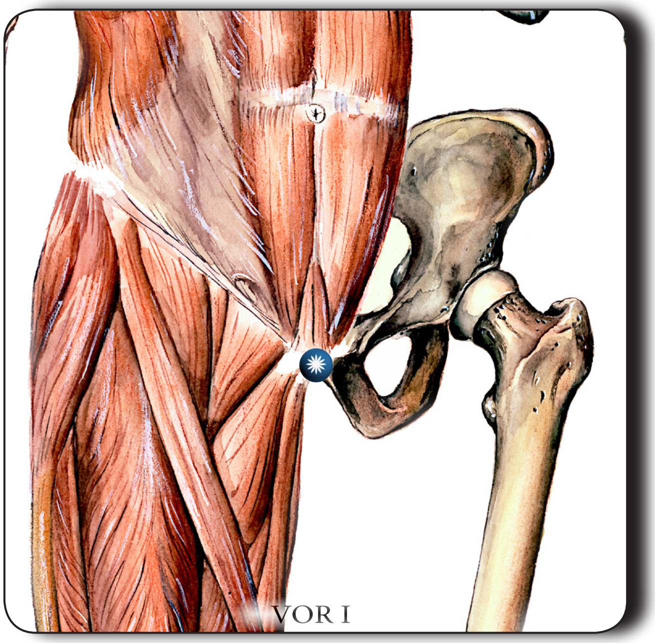
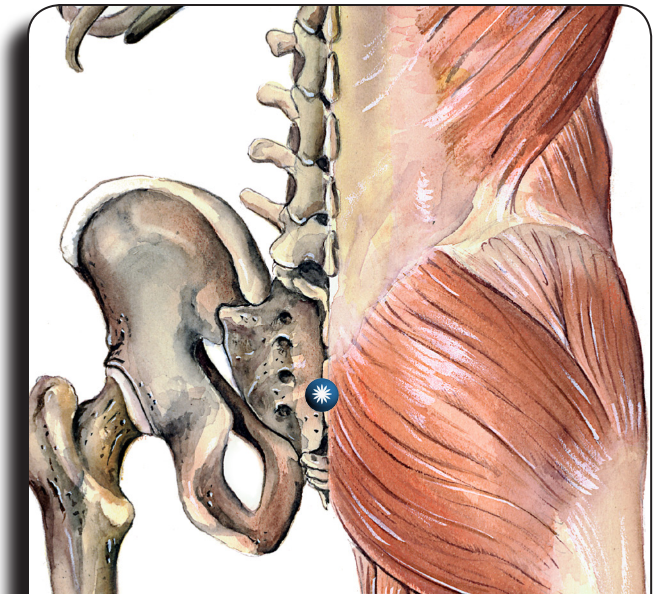
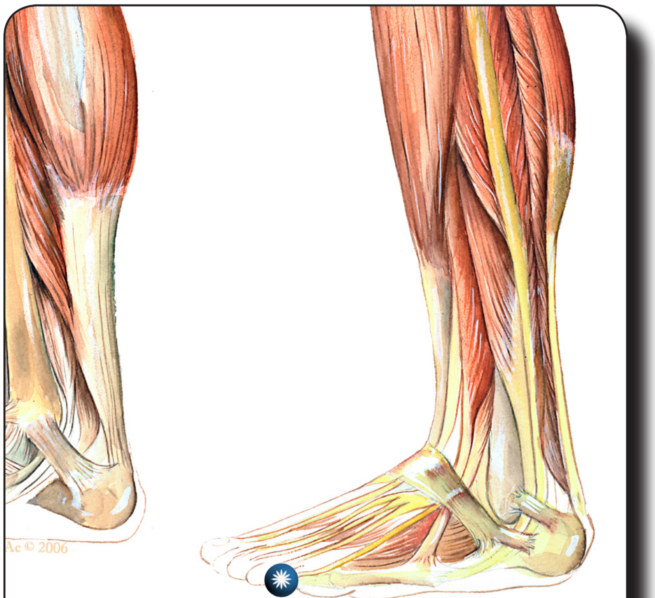
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 892: PERONEUS BREVIS, (Septal Division)

ORIGIN: Intramuscular septa.

INSERTION: Tuberosity at the base of the fifth metatarsal bone.

ACTION: Abducts, everts and plantar flexes the foot.

TEST:

Patient: Position: Supine.
M.T.P: Foot abducted (approximately 15 degrees) and plantar flexed (approximately 115 degrees). Toes in neutral position.

Doctor:
Position: At end of table facing patient.
Brace: Ipsilateral medial aspect of calcaneus.
Contact: Dorsal and lateral aspect of foot.
Direction: Invert and adduct foot.

NEUROVASCULAR: (Lat) Parietal bone, superior temporal line; 4" superior and 1" posterior to external auditory canal.

NEUROLYMPHATIC: (Ant/R) Third I.C.S., parahumeral, 6-8" lateral to sternum.

VISCERAL ORGAN:

I. *Bladder:* (Ant/Midline) Cv 1.5; middle of pubes.

II. *Nose:* (Post/Midline) Gv 2.1; apex of sacrum.

M. A. P.: B 67

V.L. : T5 R

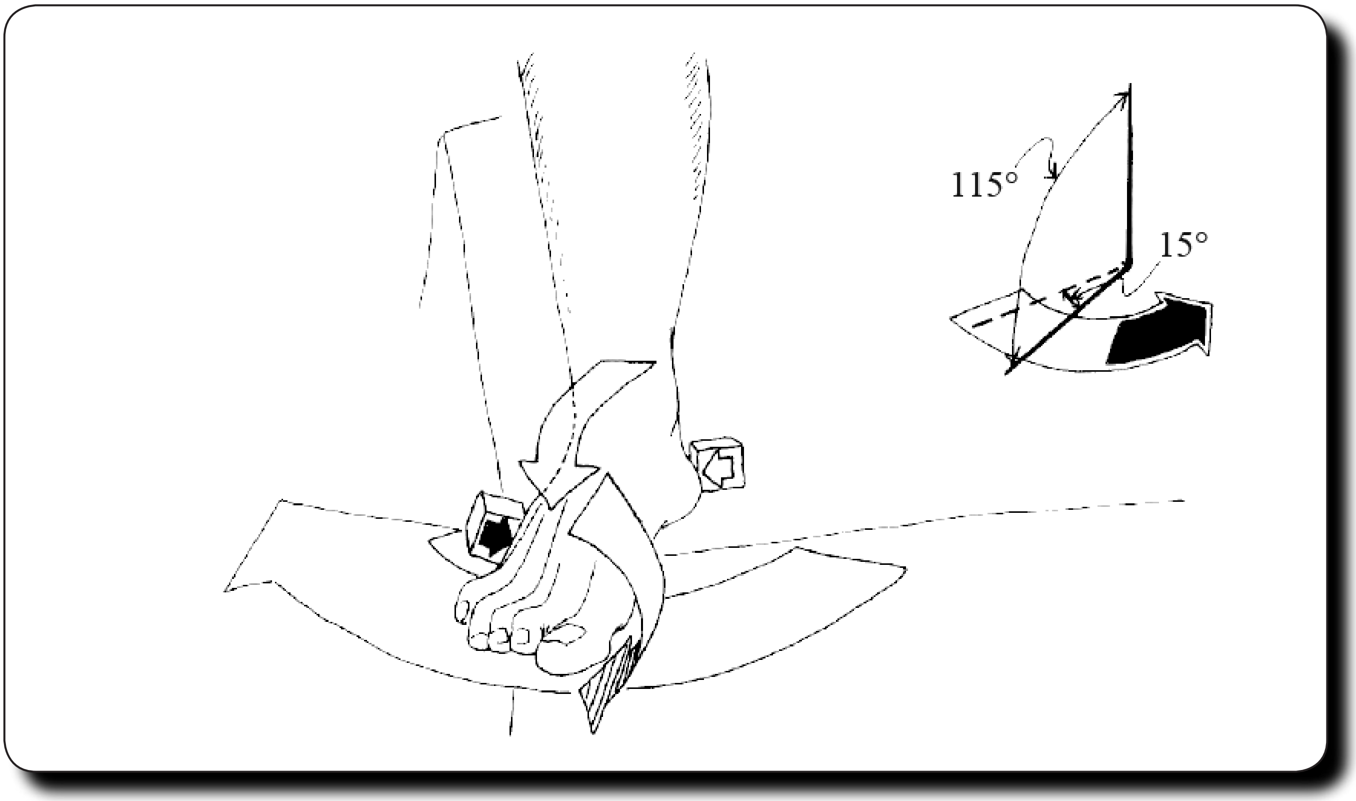
L. B. V.L. : T6 R

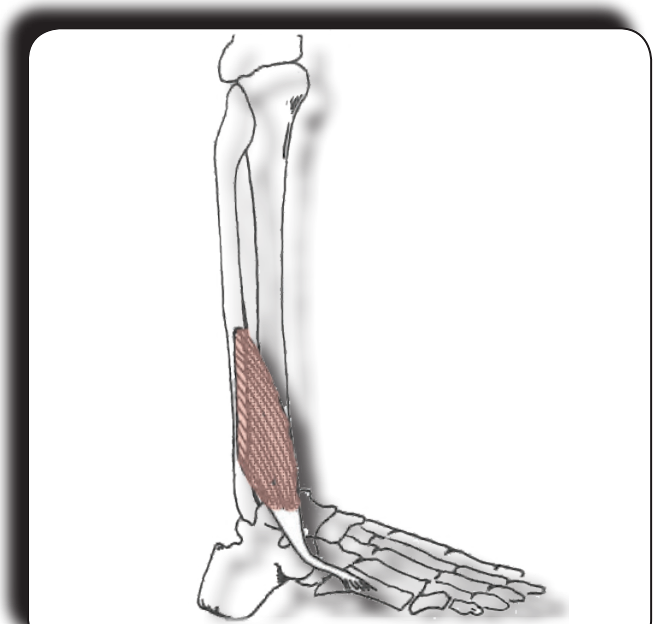
M. M. : S1

CRANIAL: Temporal

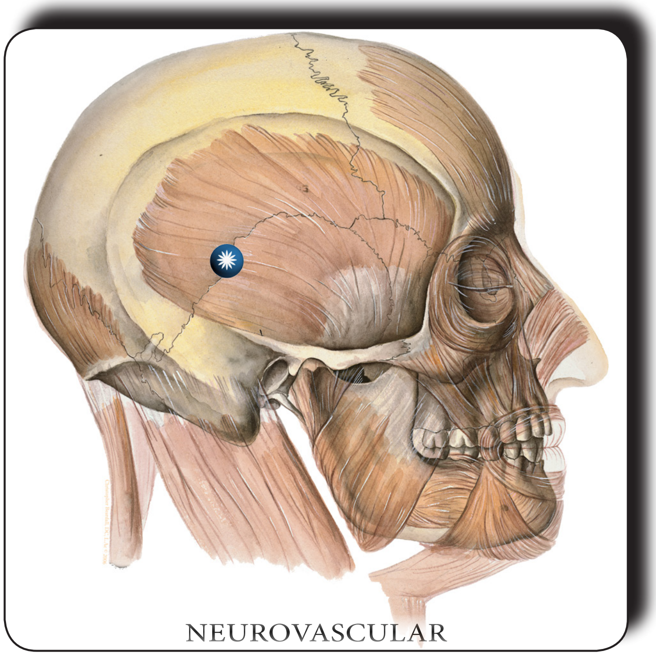
FOOT: Cuboid

NUTRIENT SOURCE: Copper
1. Allorganic Trace Minerals (S)
2. Core Copper (N.W.)

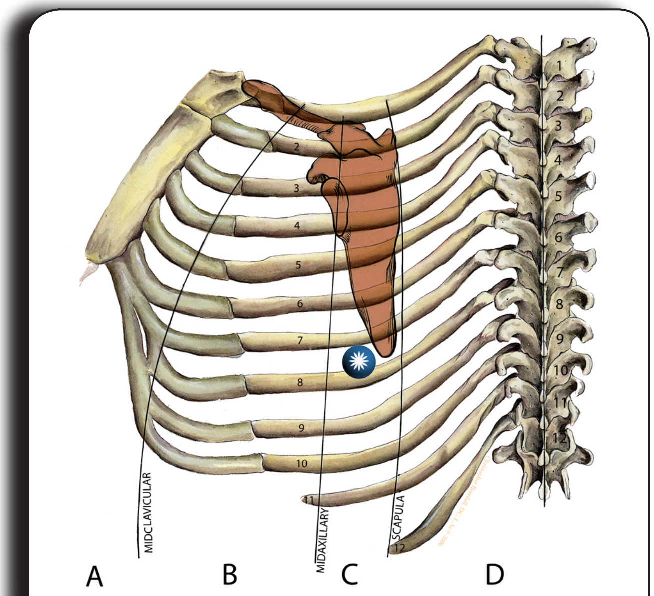




PERONEUS TERTIUS



NEUROVASCULAR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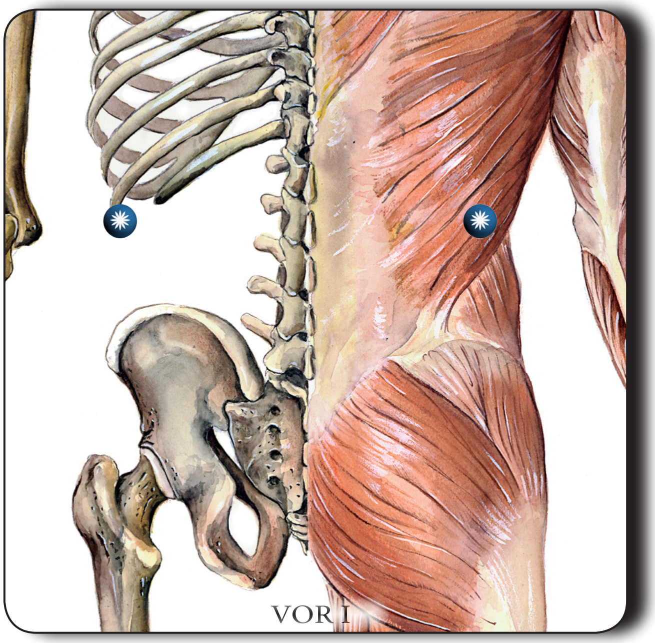
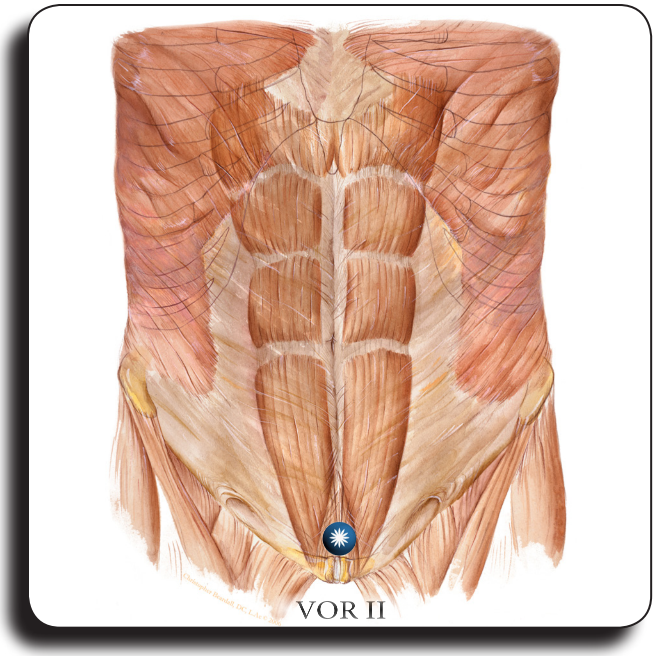
NEUROLYMPHATIC



VOR I



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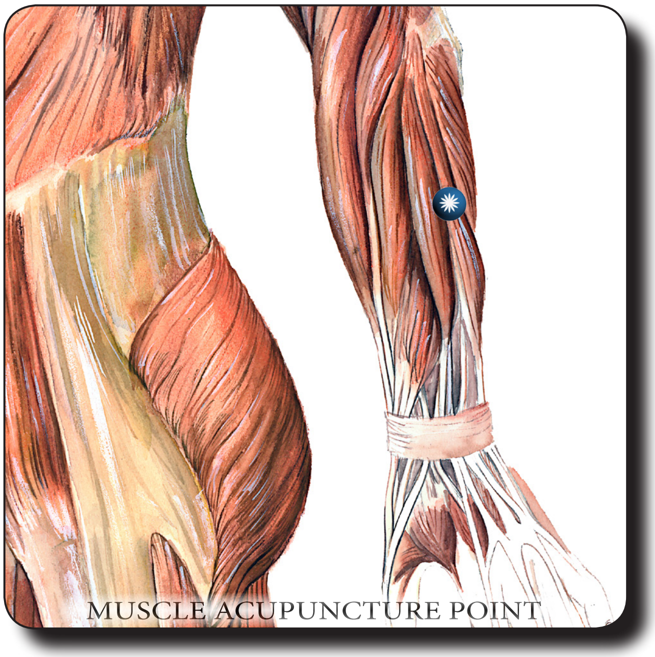


MUSCLE ACUPUNCTURE POINT

Muscle 894: PERONEUS TERTIUS

ORIGIN: Lower third of anterior surface of fibula - interosseous membrane.

INSERTION: Dorsal surface at the base of the fifth metatarsal.

ACTION: Dorsiflexes and everts the foot upon the leg.

TEST:

Patient: Position: Supine.
M.T.P.: Foot at approximately 90 degrees dorsiflexion and 10 degrees abduction with complete eversion.

Doctor:
Position: End of table facing patient.
Brace: Medial and posterior aspect of calcaneus.
Contact: Dorsal surface of fifth metatarsal.
Direction: Plantar flex and invert foot.

NEUROVASCULAR: (Lat) Squamosal suture, 2" superior and 1" posterior to external auditory canal; just above the level of the top of ear.

NEUROLYMPHATIC: (Post/L) Seventh I.C.S. parascapular, 6" from the spine.

VISCERAL ORGAN:

I. *Lung:* (Ant/BL) Lv 13; tip of eleventh rib.

II. *Bladder:* (Ant/Midline) Linea alba; 1" above pubes.

M. A. P. : T 9

V.L. : C4 L

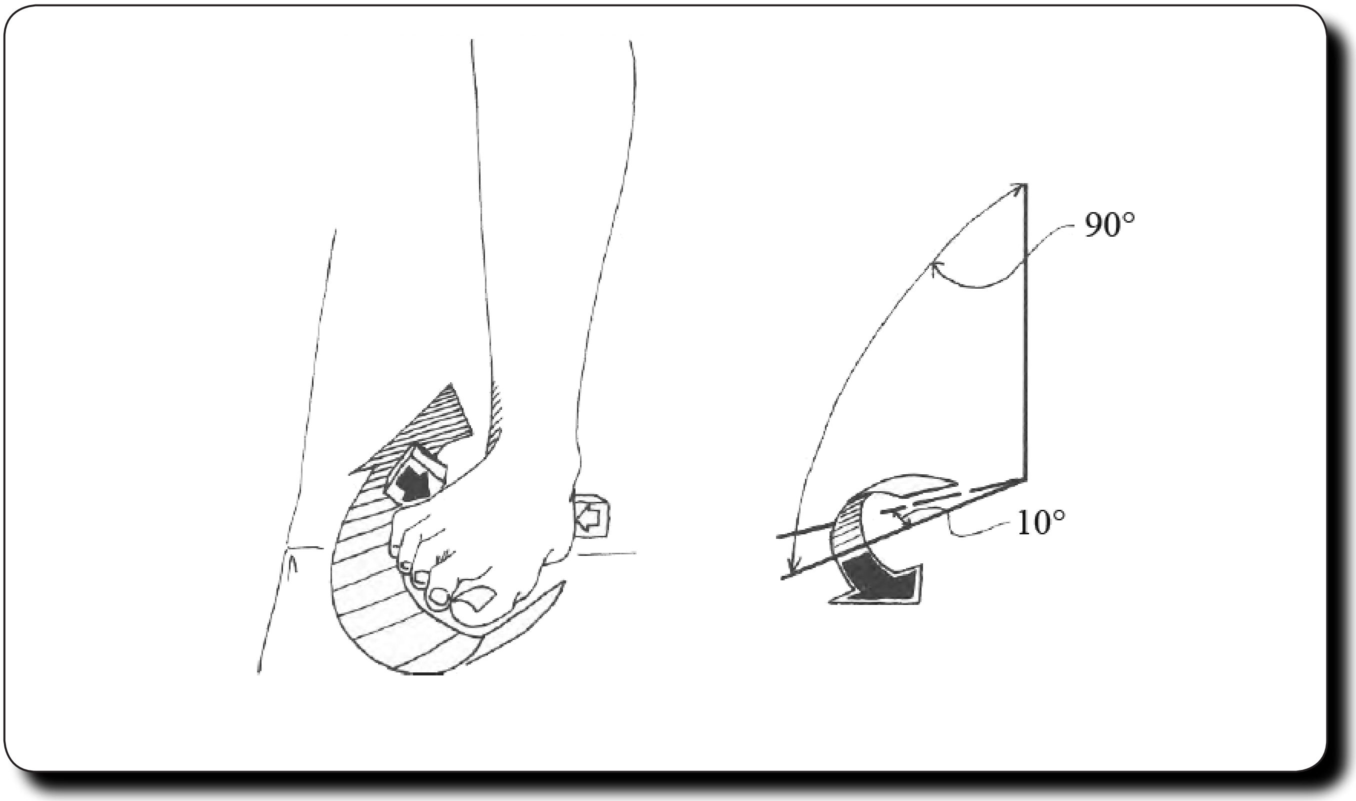
L. B. V.L. : L2 L

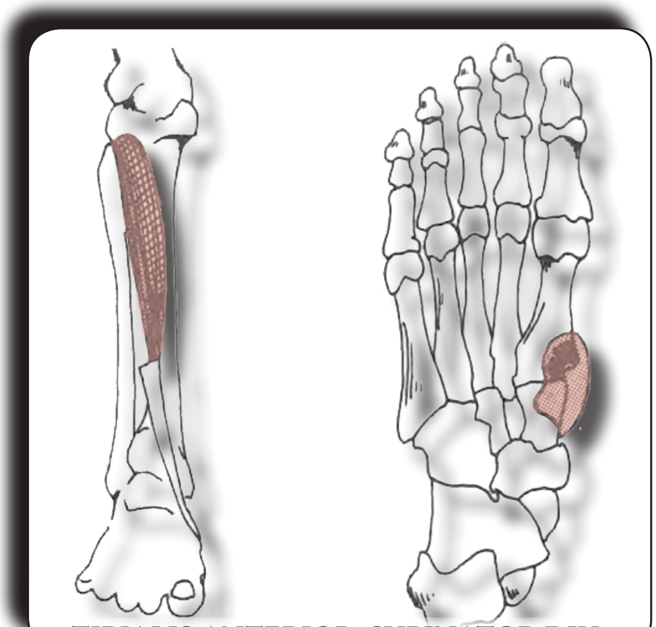
M. M. : L5

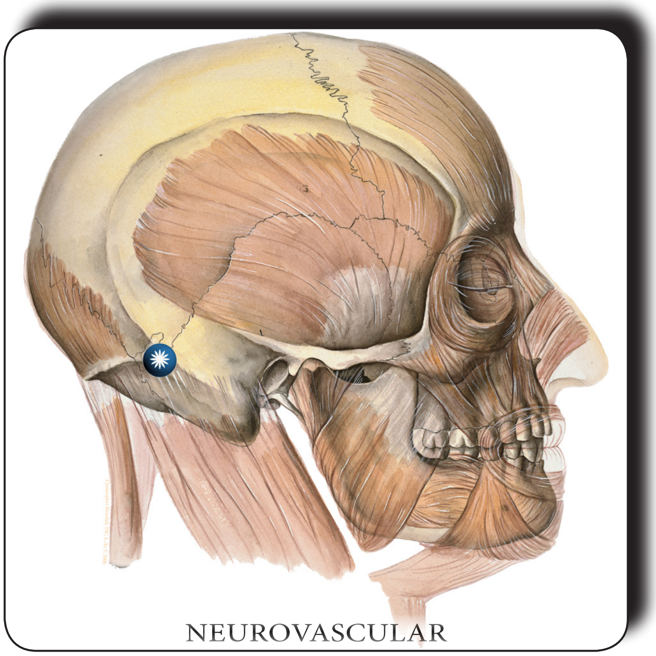
CRANIAL: Temporal

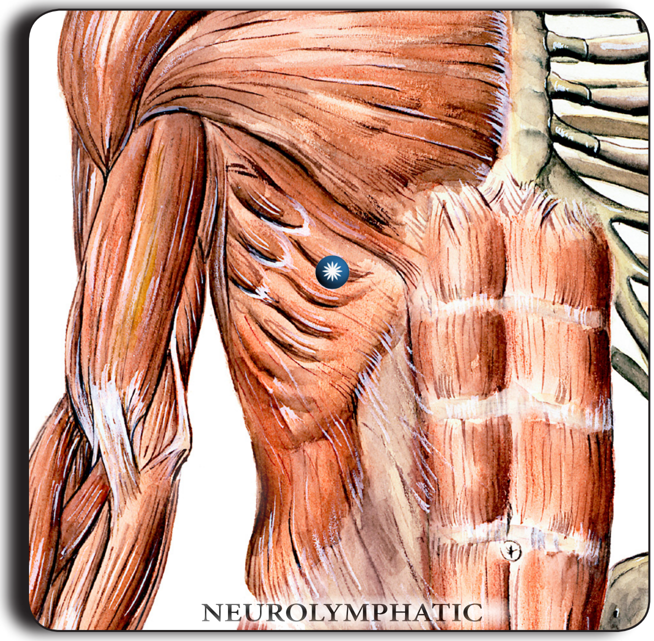
FOOT: Cuboid

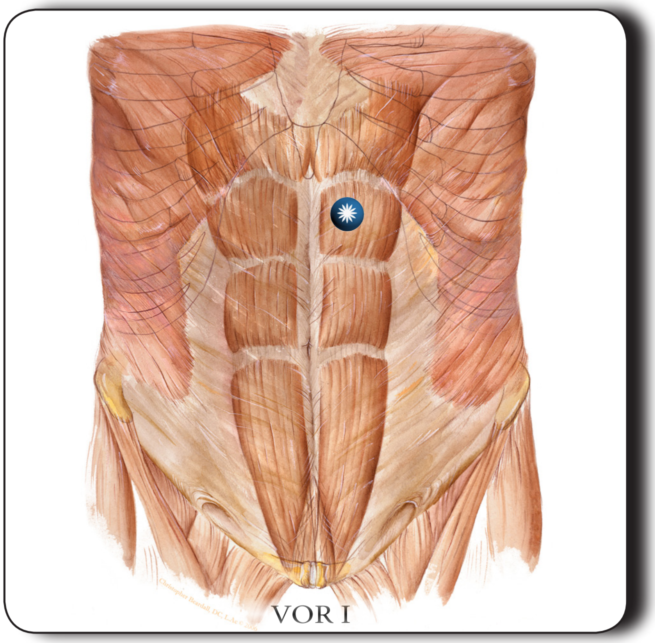
NUTRIENT SOURCE: Manganese
1. Manganese B12 (S)
2. Core Manganese (N.W.)

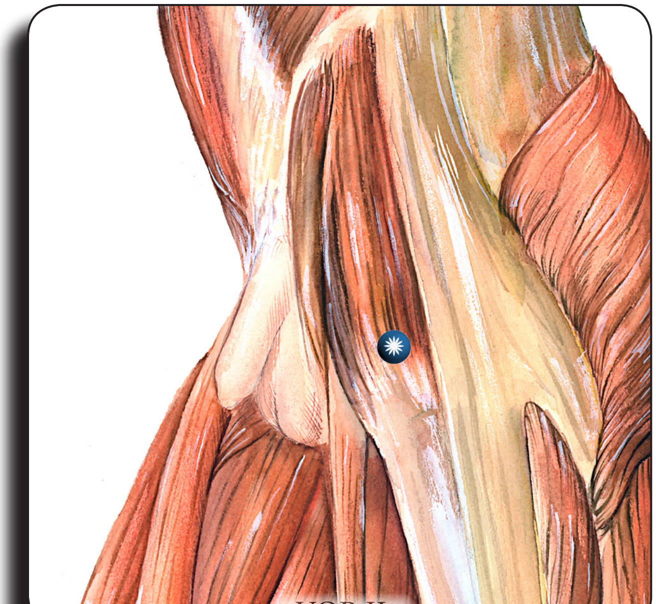


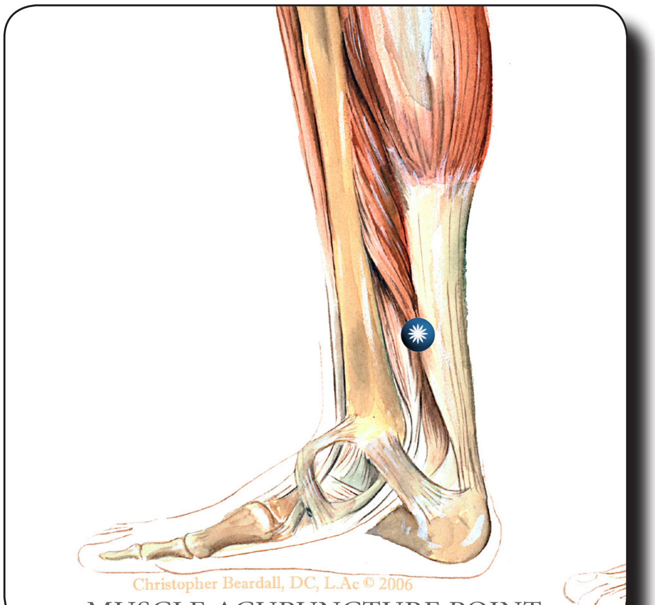

TIBIALIS ANTERIOR, SUPINATOR DIV.


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


Christopher Beardall, DC, L.Ac © 2006
MUSCLE ACUPUNCTURE POINT

Muscle 896: TIBIALIS ANTERIOR, (Supinator Division)

ORIGIN: Lateral condyle and upper 1/2 to 2/3 of lateral surface of body of tibia.

INSERTION: Medial and upper surface of base of first metatarsal bone.

ACTION: Supinates, inverts and adducts the foot.

TEST:

Patient: Position: Supine.
M.T.P.: Foot adducted 20 degrees, inverted, supinated and in 90 degrees dorsiflexion. Plantar flex all toes.

Doctor:
Position: End of table facing patient.
Brace: Inferior aspect of ipsilateral calcaneus.
Contact: Dorsal aspect of first metatarsal.
Direction: Pronate and plantar flex foot upon leg.

NEUROVASCULAR: (Lat) Asterion.

NEUROLYMPHATIC: (Ant/R) Sixth I.C.S., at the costal cartilage junction.

VISCERAL ORGAN:

I. *Jejunum, Fourth Section:* (Ant/L) Rectus abdominis, third section,1/2" below attachment of fourth section.

II. *Urethra, Prostate Portion:* (Lat/BL) G 29, 1" below belly of tensor fascia lata.

M. A. P. : Sp 6

V.L. : L2 L

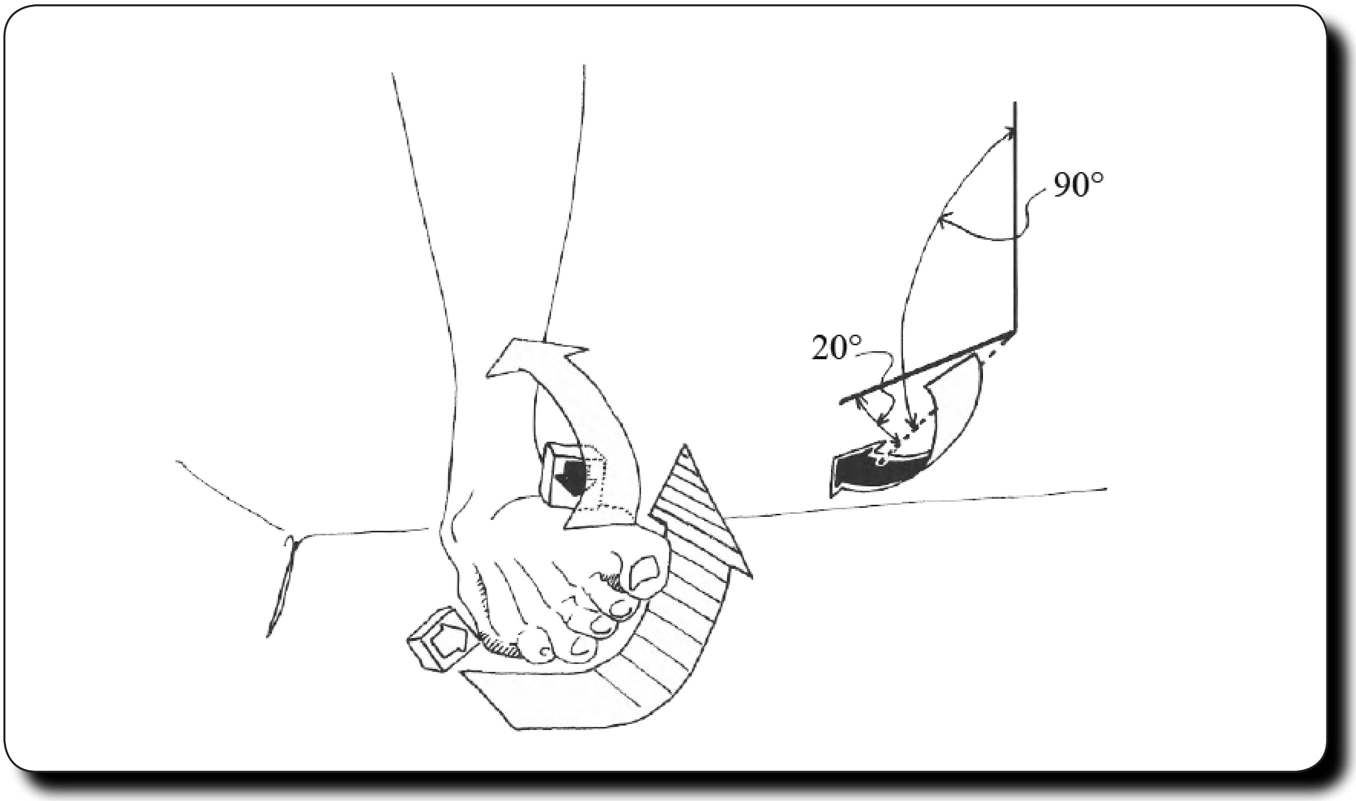
L. B. V.L. : C4 L

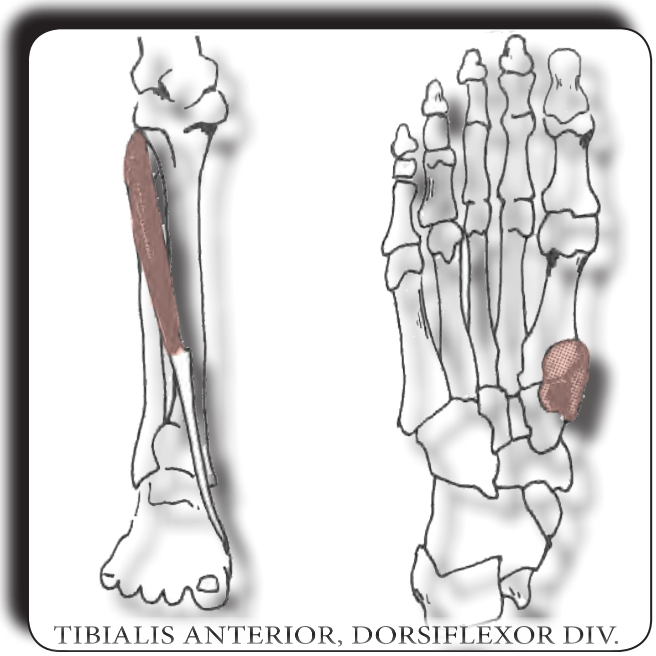
M. M. : L4

CRANIAL: Frontal

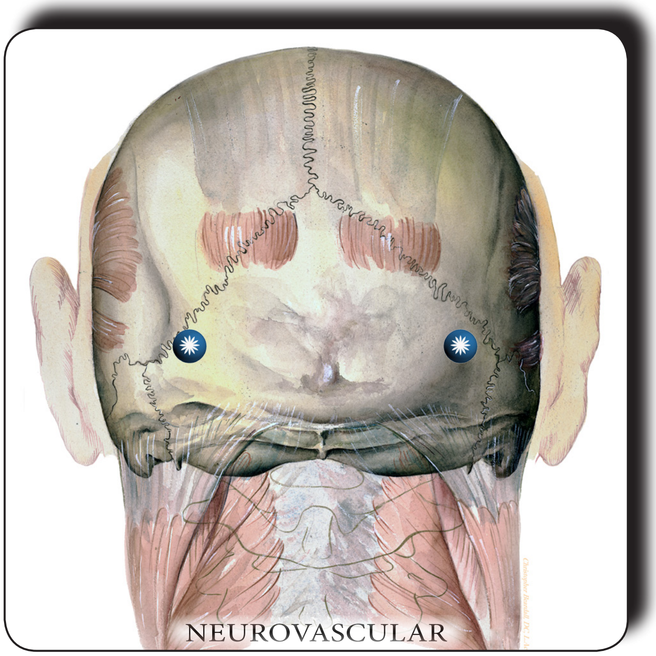
FOOT: Navicular

NUTRIENT SOURCE: Calcium
1. Minchex (S)
2. Core Calcium (N.W.)





TIBIALIS ANTERIOR, DORSIFLEXOR DIV.



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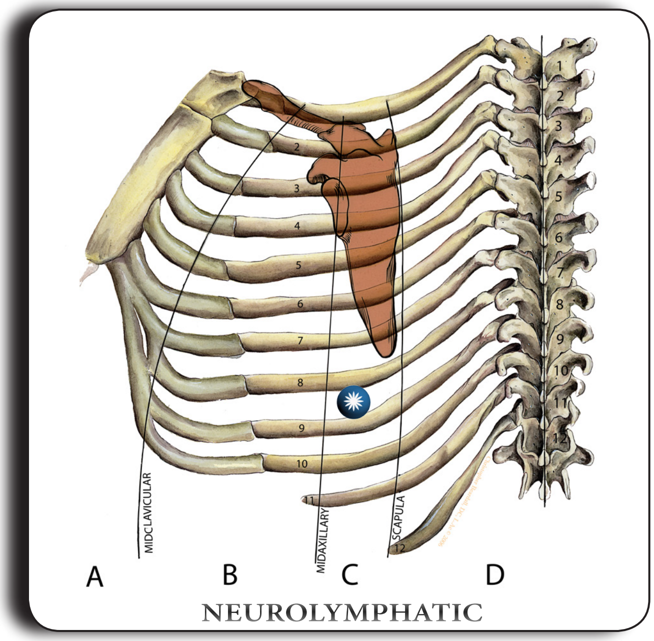
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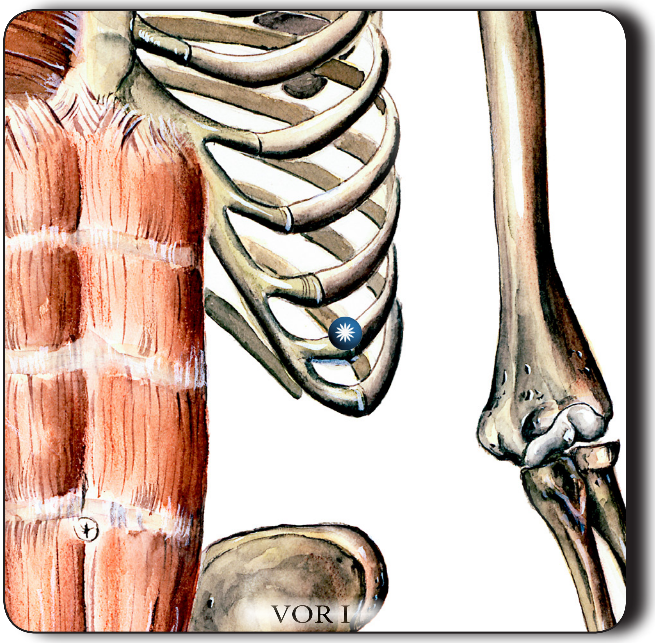
NEUROLYMPHATIC



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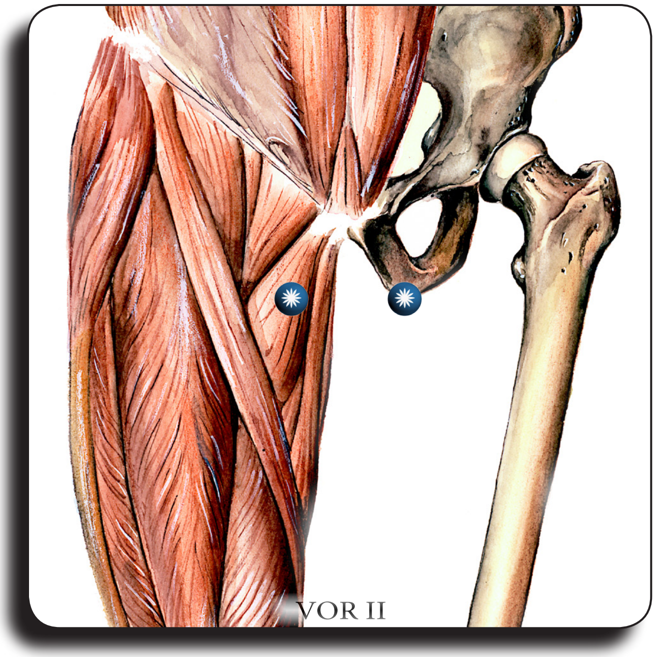
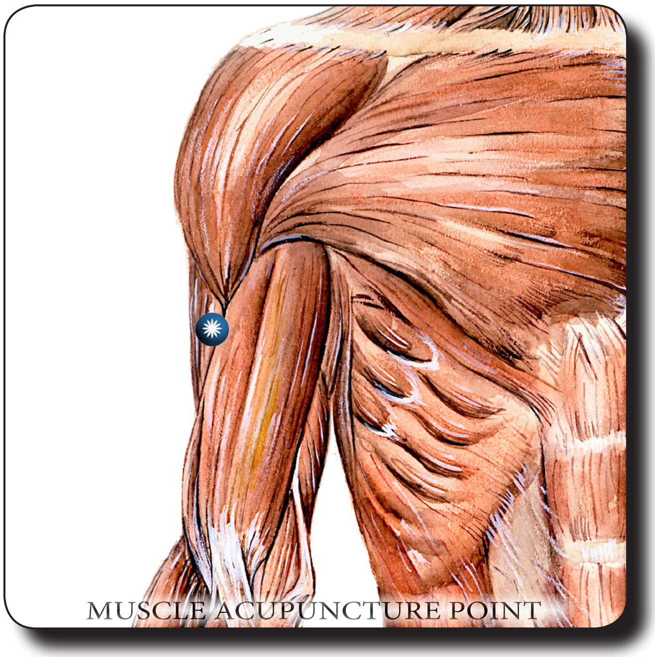


VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 898: TIBIALIS ANTERIOR, (Dorsiflexor Division)

ORIGIN: Interosseous membrane, intramuscular septum.

INSERTION: Medial and plantar surface of the first cuneiform bone.

ACTION: Dorsiflexes the foot upon the leg.

TEST:

Patient: Position: Supine.
M.T.P.: Foot fully flexed upon; leg (approximately 75 degrees). Keep all toes plantar flexed.

Doctor:
Position: End of table facing patient.
Brace: Inferior aspect of ipsilateral calcaneus.
Contact: Dorsal aspect of foot.
Direction: Plantar flex foot upon leg.

NEUROVASCULAR: (Post/BL) Occipital bone, 1" medial to asterion.

NEUROLYMPHATIC: (Post/L) Eighth I.C.S., lateral humeral area.

VISCERAL ORGAN:

I. *Spleen:* (Ant/L) End of ninth rib, costal cartilage junction.

II. *Ductus Deferens:* (Ant/BL) Lv 10, below obturator foramen.

M. A. P. : L 3 3/4

V.L. : C5 L

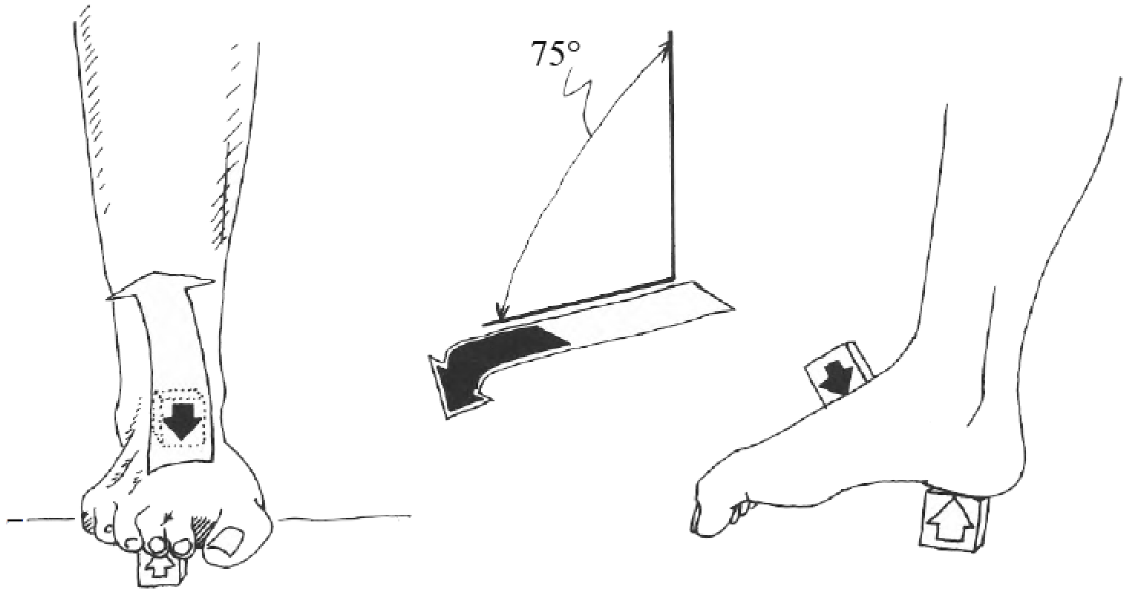
L. B. V.L. : L1 L

M. M. : L5

CRANIAL: Frontal

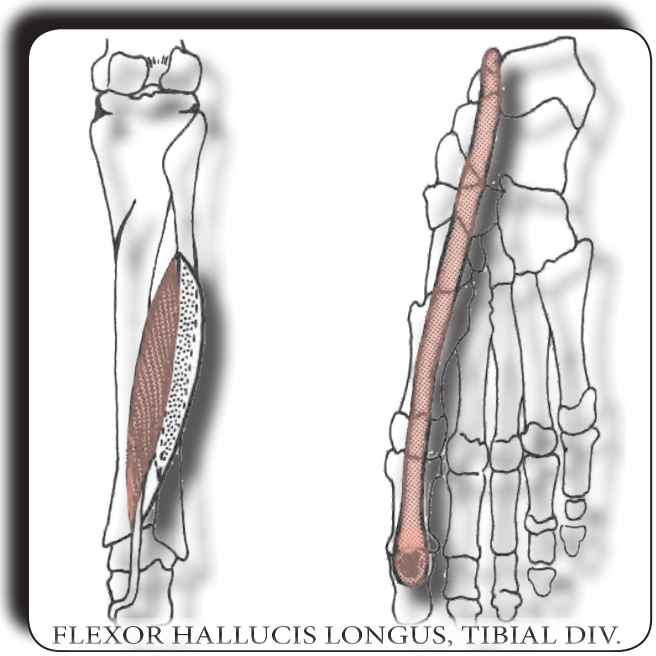
FOOT: Navicular

NUTRIENT SOURCE: Sodium
1. Sea Salt

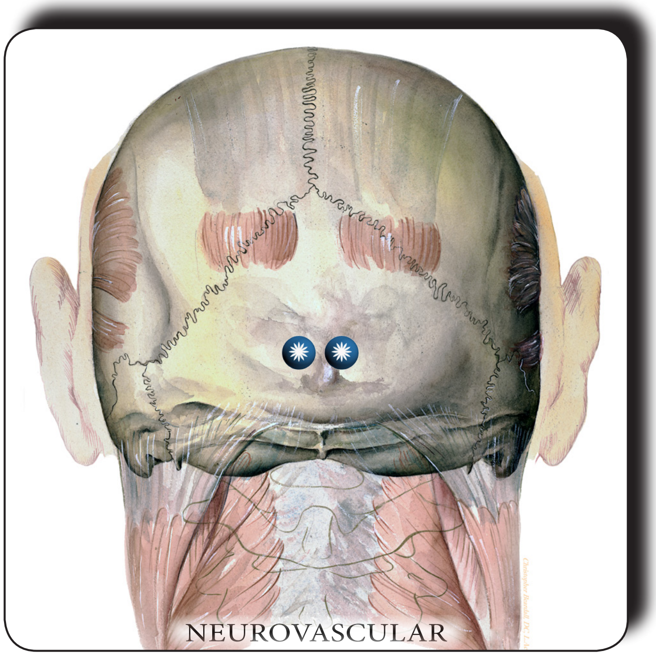


SECTION II:

BIG TOE



FLEXOR HALLUCIS LONGUS, TIBIAL DIV.



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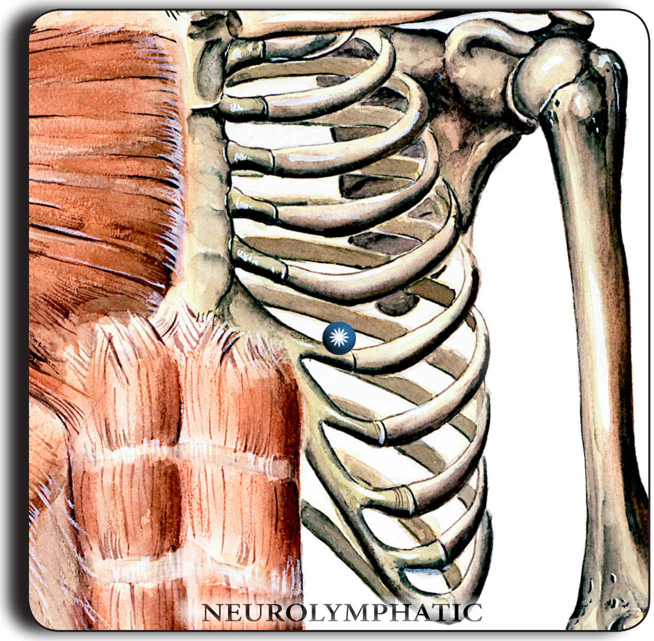

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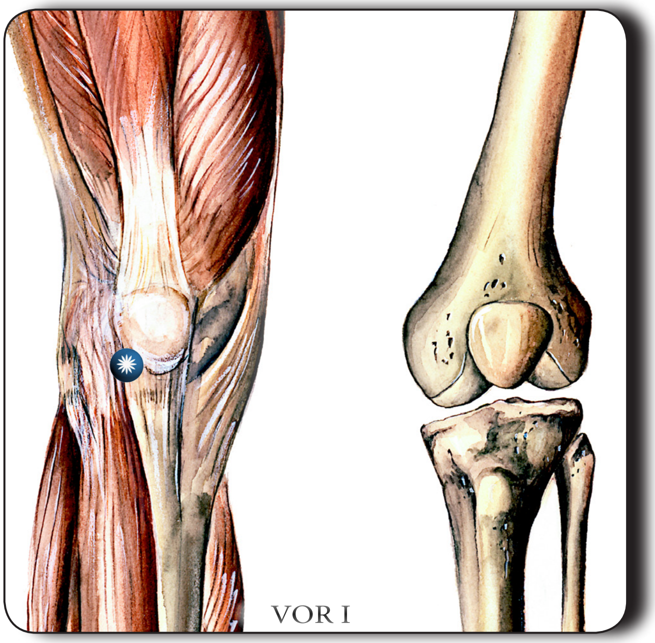

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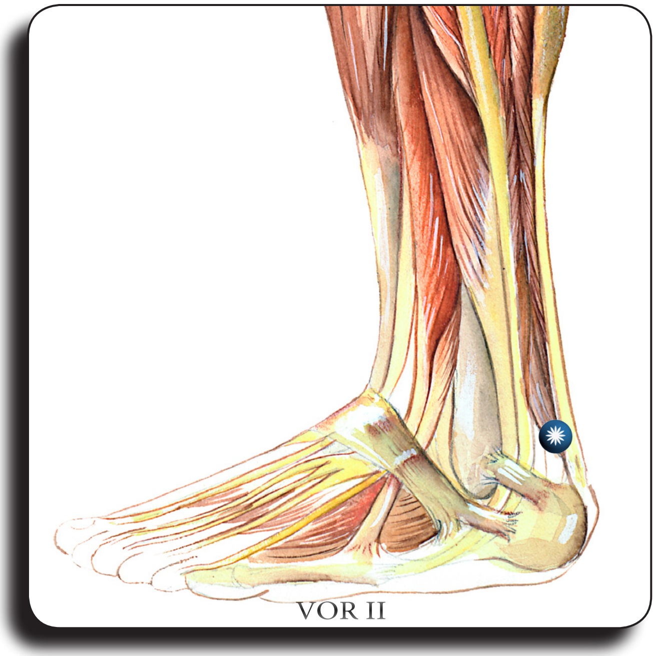

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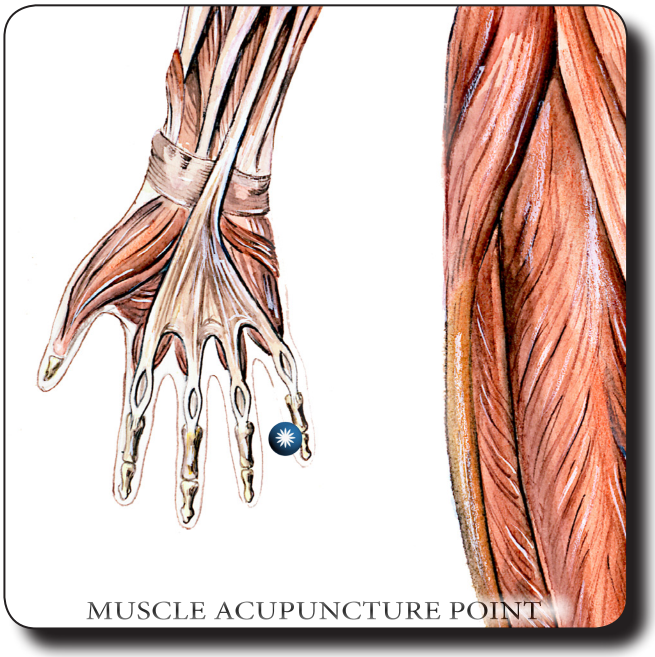


MUSCLE ACUPUNCTURE POINT

Muscle 900: FLEXOR HALLUCIS LONGUS, (Tibial Division)

ORIGIN: Lower part of interosseous membrane, intermuscular septum and from fascia covering tibialis posterior.

INSERTION: Base of distal phalanx of great toe.

ACTION: Flexes distal phalanx of great toe. Assists in foot plantar flexion.

TEST:

Patient: Position: Supine.
M.T.P.: Plantar flex distal phalanx of great toe and move foot slightly into eversion

Doctor:
Position: At side of table facing patient's feet.
Brace: Dorsal surface of proximal phalanx.
Contact: Plantar surface of distal phalanx.
Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Post/BL) Superior to external occipital protuberance.

NEUROLYMPHATIC: (Ant/L) Fifth I.C.S., costal junction.

VISCERAL ORGAN:

I. *Liver:* (Ant/R) S 35; lateral inferior aspect of patella.

II. *Anterior Pituitary:* (Lat/BL) B 60; posterior distal aspect of fibula.

M. A. P. : H 9

V.L. : L2 R

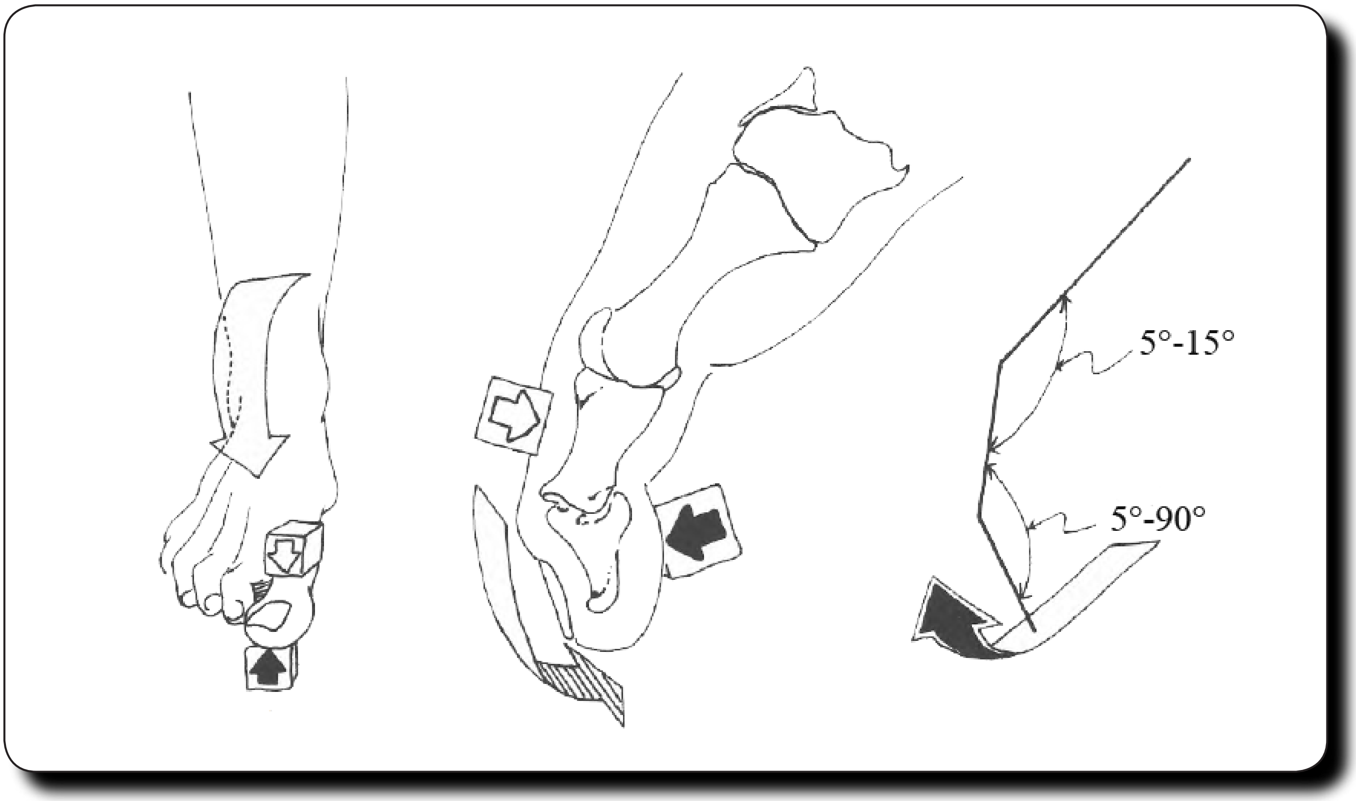
L. B. V.L. : C4 R

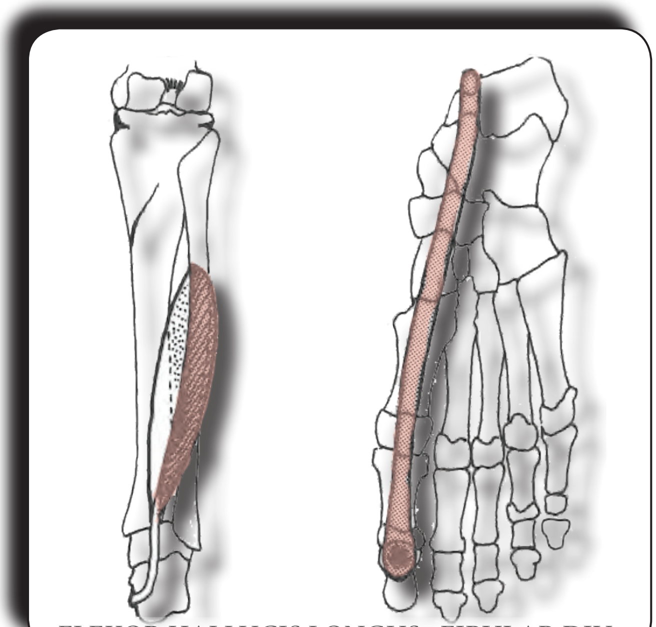
M. M. : S2

CRANIAL: Vomer

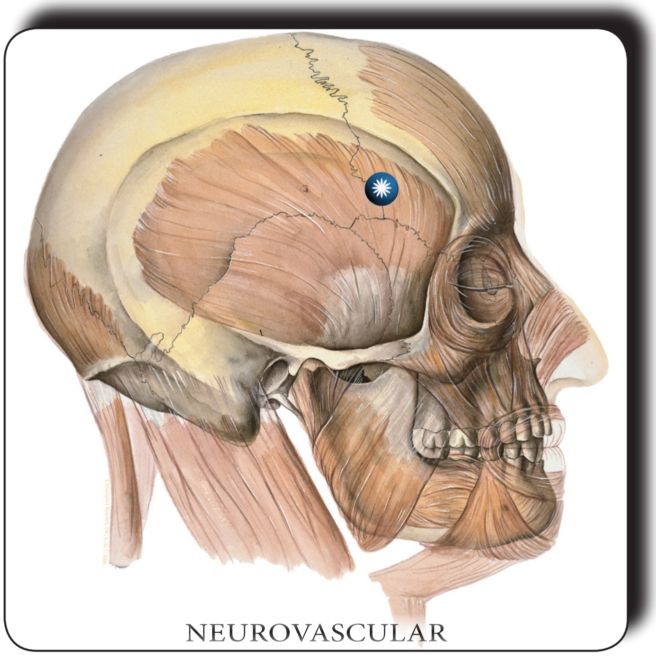
FOOT: Second Metatarsal

NUTRIENT SOURCE: Iron
1. Ferrofood (S)
2. Core Iron (N.W.)





FLEXOR HALLUCIS LONGUS, FIBULAR DIV.



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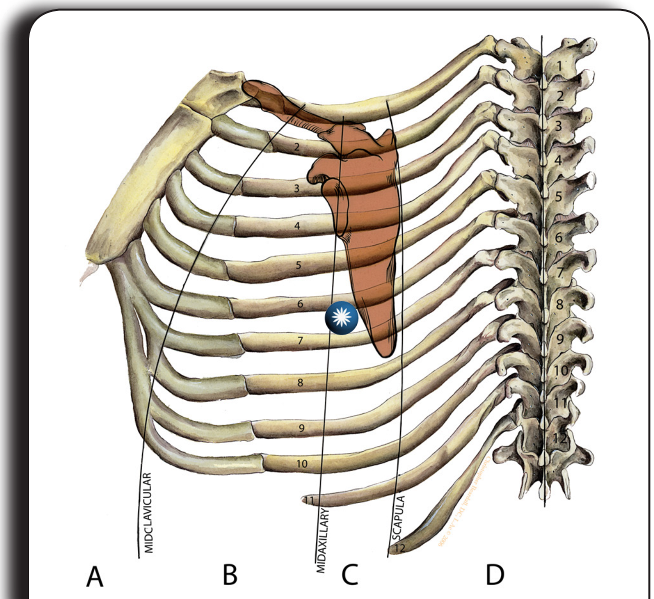
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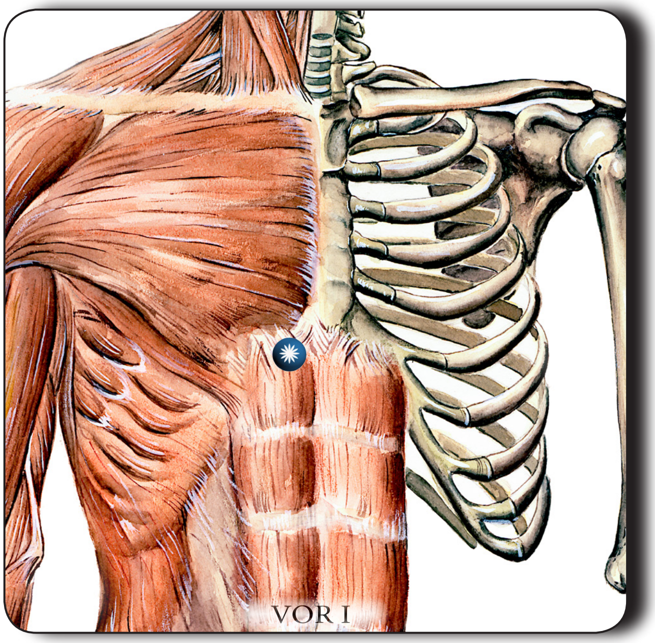

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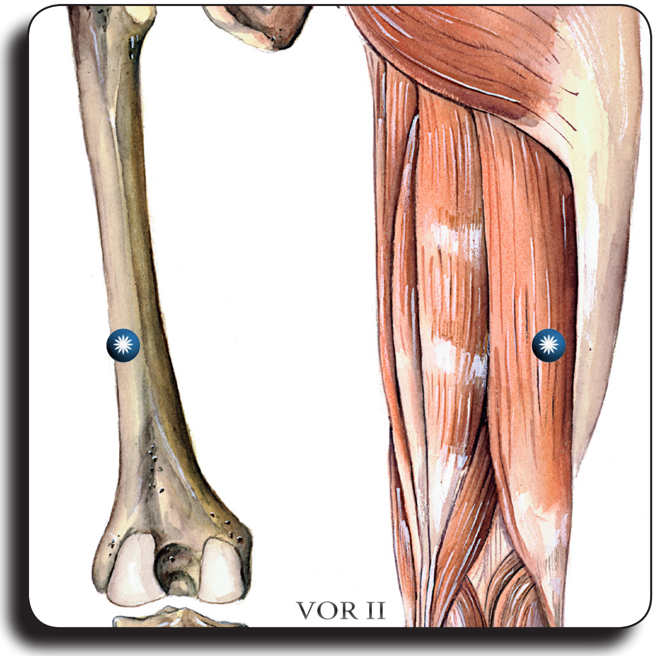

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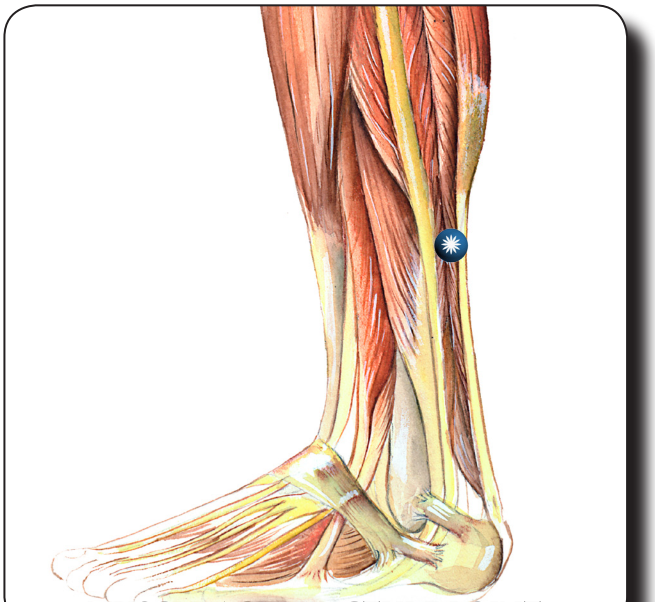


MUSCLE ACUPUNCTURE POINT

Muscle 902: FLEXOR HALLUCIS LONGUS, (Fibular Division)

ORIGIN: Inferior 2/3 of the posterior surface of the body of the fibula.

INSERTION: Base of the distal phalanx of the great toe.

ACTION: Flexes distal phalanx of great toe. Assists in foot plantar flexion and supination.

TEST:

Patient: Position: Supine.
M.T.P.: Plantar flex distal phalanx of great toe and move foot into a supinated position.

Doctor:
Position: Side of table facing patient's feet.
Brace: Dorsal surface of proximal phalanx.
Contact: Plantar surface of distal phalanx.
Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Lat) Coronal suture, 1" inferior to superior temporal line.

NEUROLYMPHATIC: (Lat/L) Sixth I.C.S., parahumeral area.

VISCERAL ORGAN:

I. *Esophagus - Abdominal Part:* (Ant/R) Right side of xiphoid.

II. *Kidney:* (Post/BL) Belly of biceps femoris at level of B 51, 1 - 2" lateral.

M. A. P. : B 58.2

V.L. : C5 L

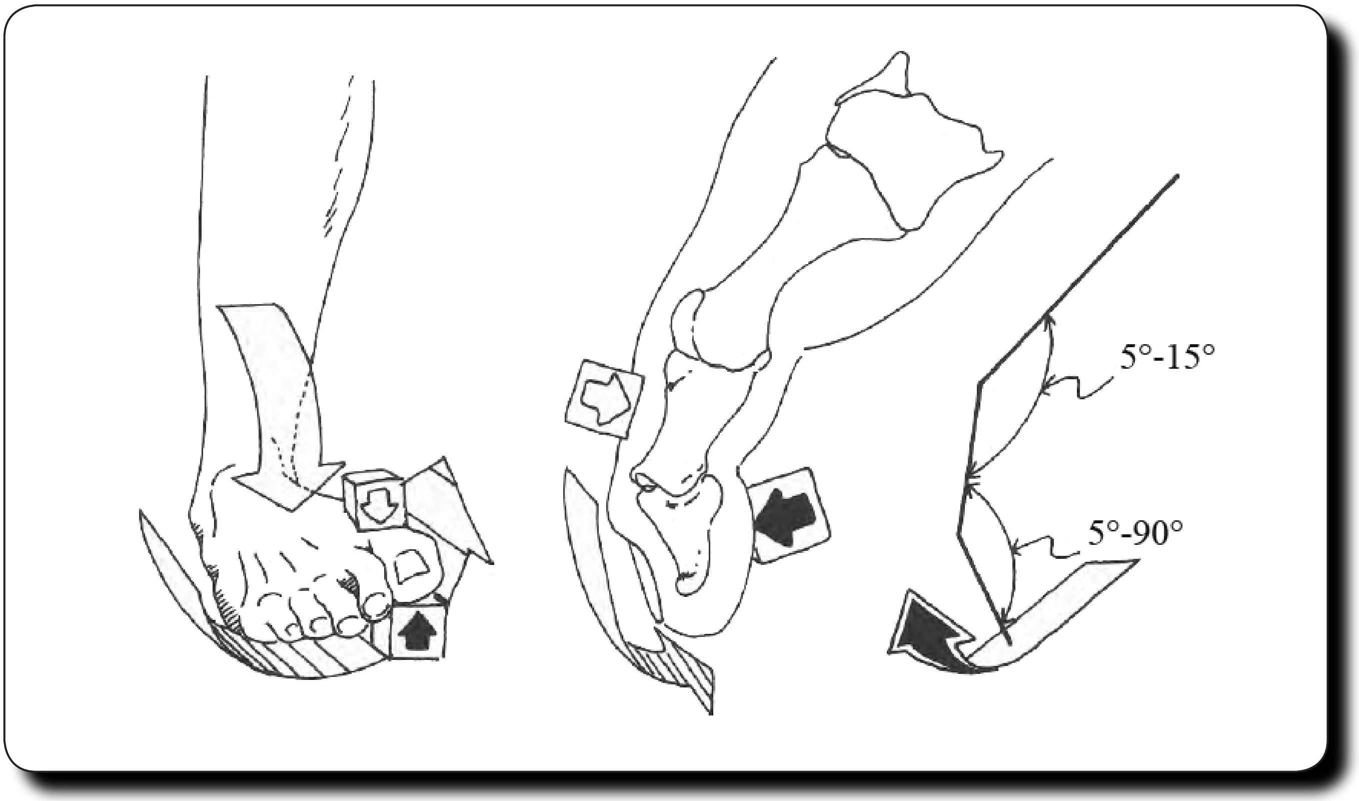
L. B. V.L. : L1 L

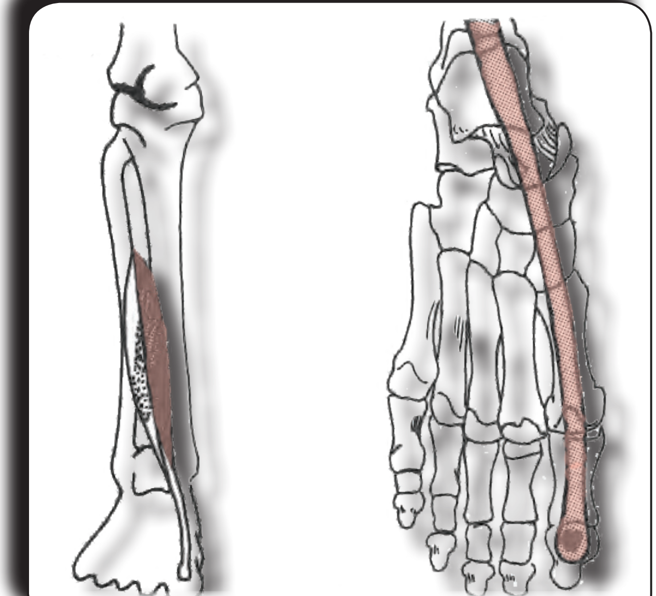
M. M. : S1

CRANIAL: Inferior Conchae

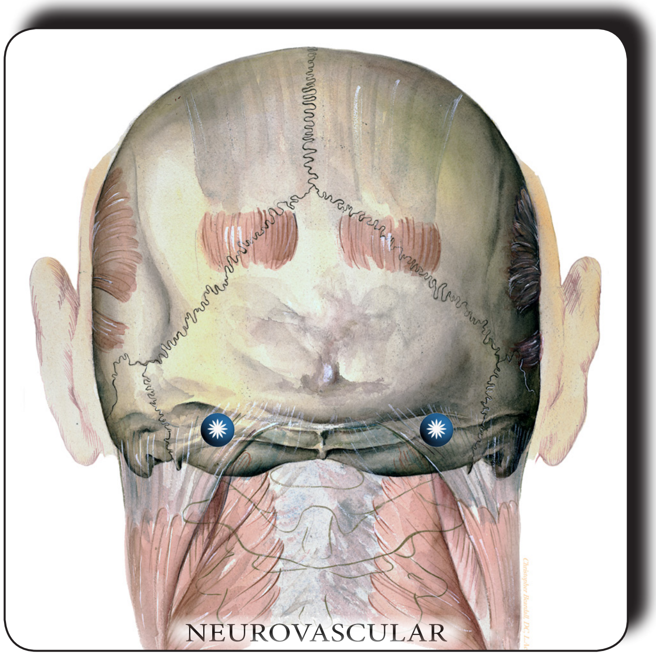
FOOT: Proximal Phalanx of Second Toe

NUTRIENT SOURCE: Selenium
1. Core Selenium (N.W.)
2. Selenium Chelate (N.W.)





EXTENSOR HALLUCIS LONGUS, INEROSSESOUS DIV.



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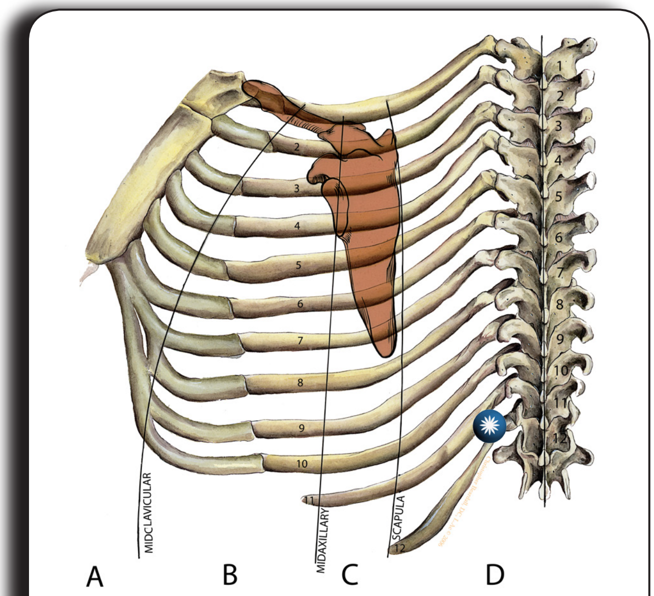
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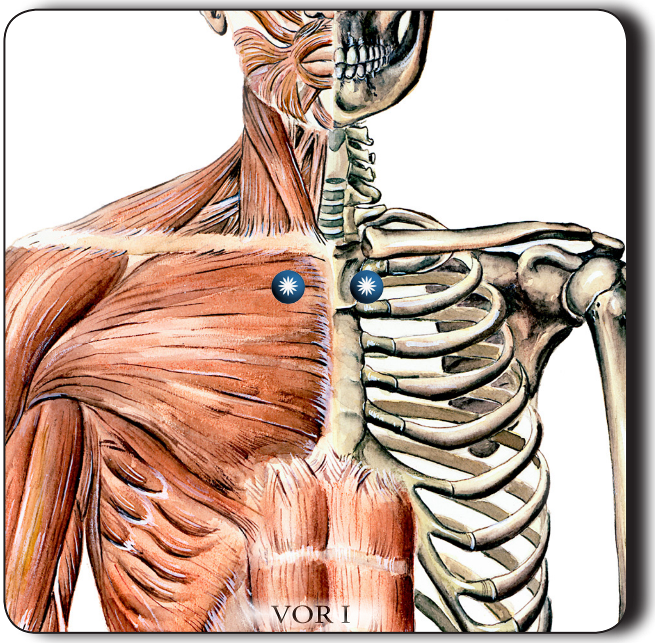
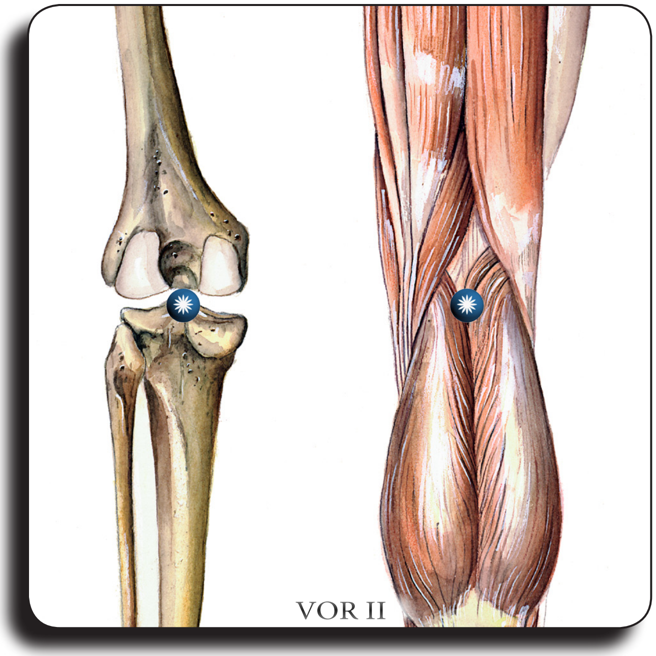
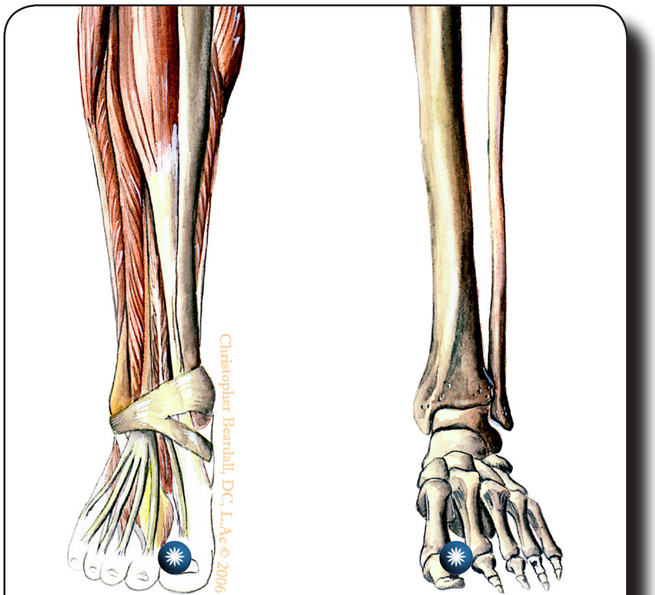
NEUROLYMPHATIC



VOR I



VOR II


Christopher Beardall, DC, L.Ac © 2006

MUSCLE ACUPUNCTURE POINT

Muscle 904: EXTENSOR HALLUCIS LONGUS, (Interosseous Division)

ORIGIN: Interior osseous membrane between tibia and fibula.

INSERTION: Distal phalanx of great toe.

ACTION: Dorsiflexes distal phalanx of great toe, especially in inverted position. Assists in foot dorsiflexion.

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex distal phalanx of great toe and move foot into inverted position.
Doctor:
Position: End of table facing patient.
Brace: Plantar surface of proximal phalanx.
Contact: Dorsal surface of distal phalanx.
Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Post/BL) Occipital bone, medial to occipitomastoid suture.

NEUROLYMPHATIC: (Post/L) Eleventh I.C.S. 1” lateral to spine.

VISCERAL ORGAN:

I. *Thymus:* (Ant/BL) Junction of first rib and sternum, inferior border

II. *Anterior Pituitary:* (Post/BL) B 54, popliteal fossa.

M. A. P. : Lv 1

V.L. : L3 R

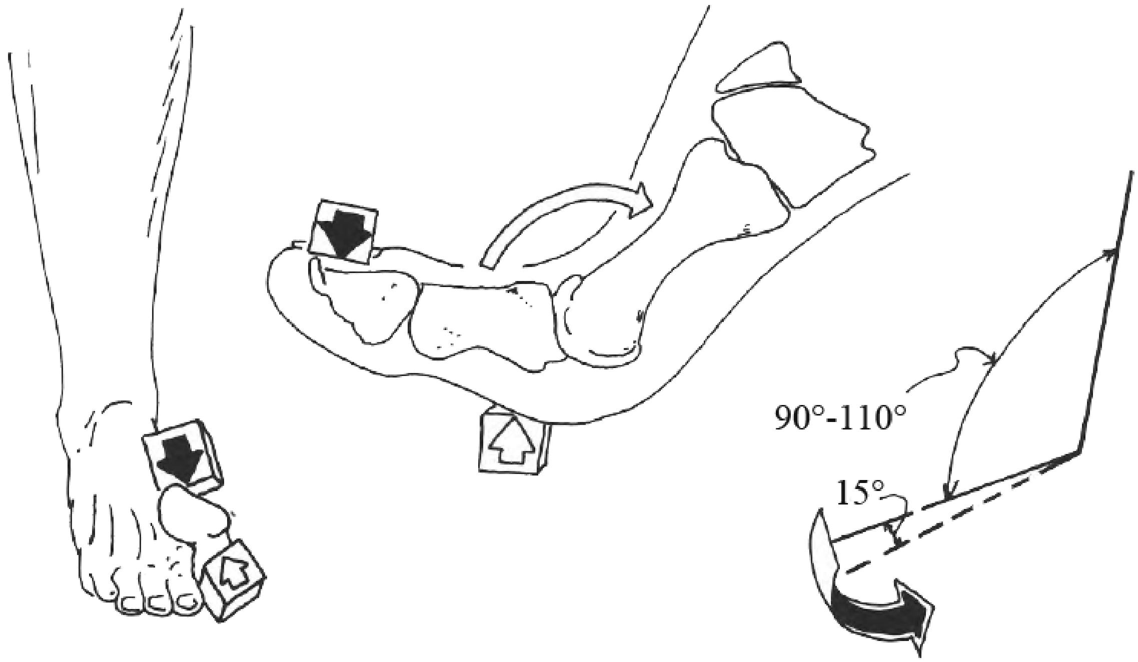
L. B. V.L. : C3 R

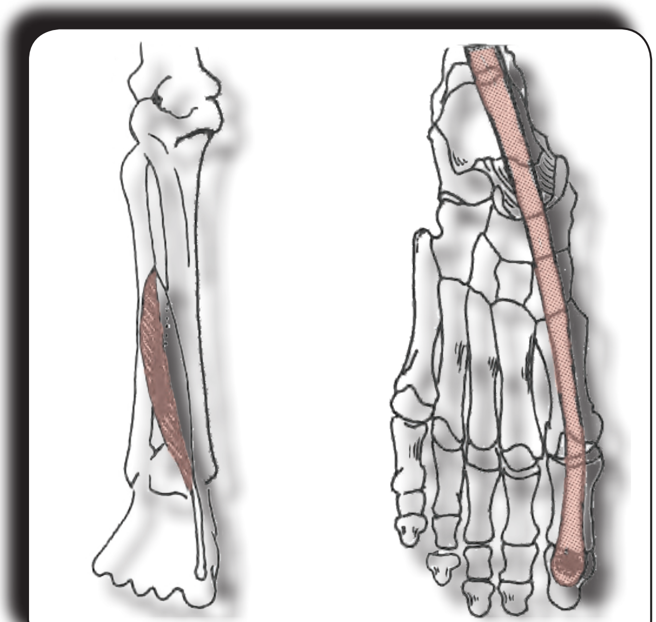
M. M. : S1

CRANIAL: Mandible

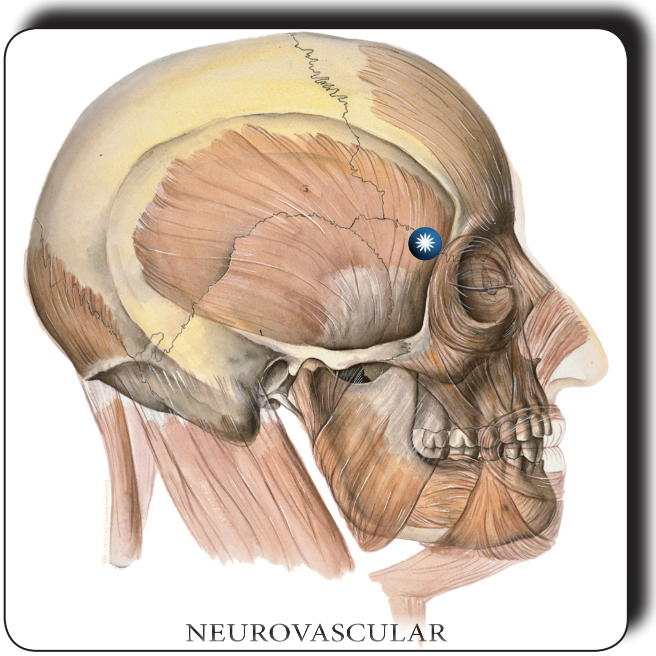
FOOT: Proximal Phalanx of Great Toe

NUTRIENT SOURCE: Choline
1.Choline (S)
2.Core Choline (NW)





EXTENSOR HALLUCIS LONGUS, FIBULAR DIV.



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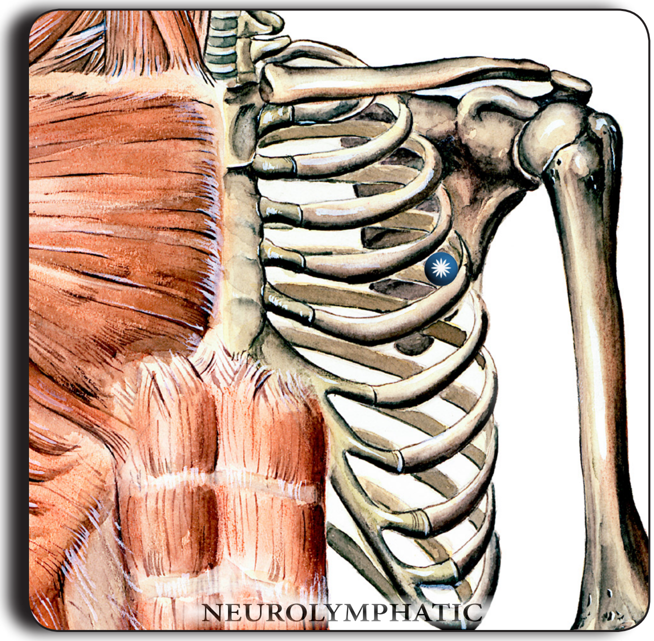

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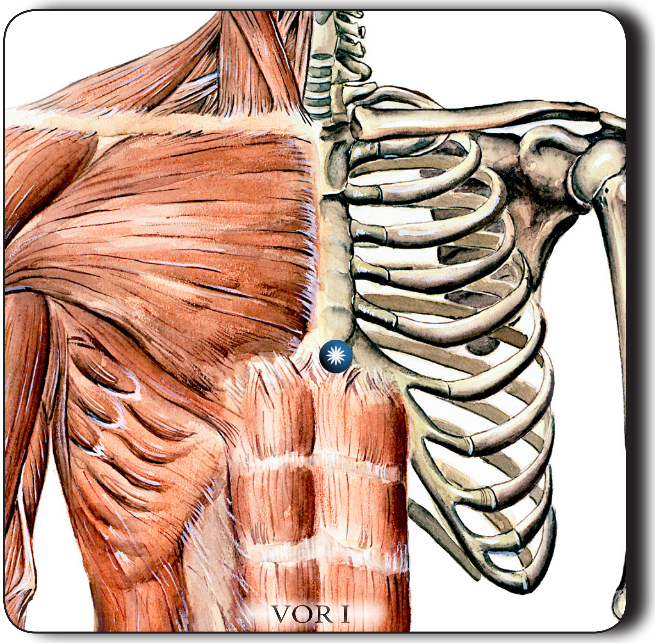
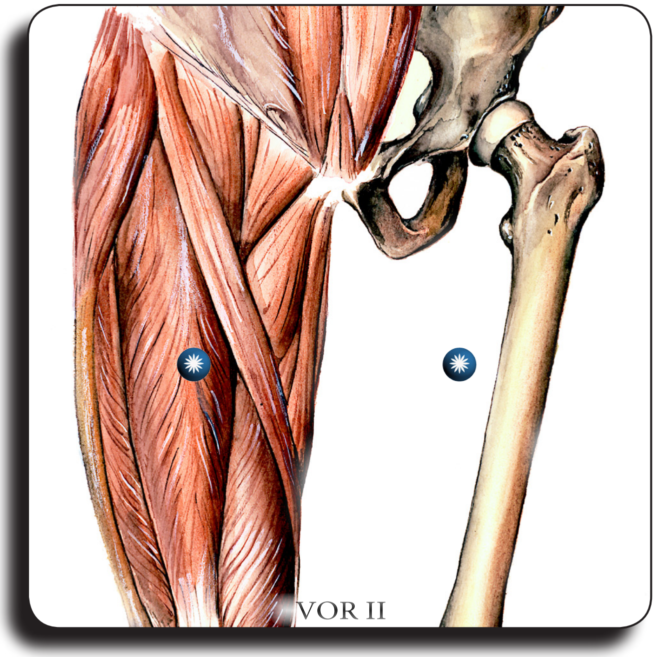
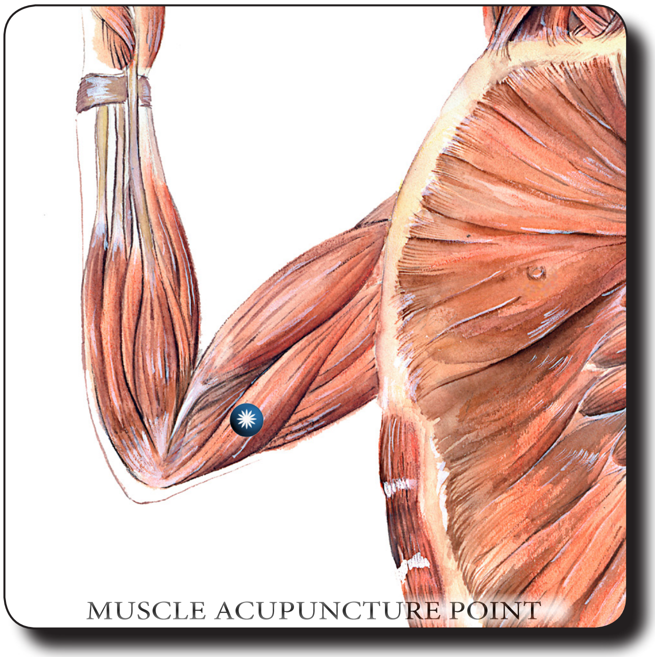


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 906: EXTENSOR HALLUCIS LONGUS, (Fibular Division)

ORIGIN: Anterior surface of the fibula, middle 1/2 of its extent.

INSERTION: Base of the distal phalanx of the great toe.

ACTION: Dorsiflexes distal phalanx of great toe and assists in foot dorsiflexian.

TEST:

Patient: Position: Spine.
M.T.P.: Dorsiflex distal phalanx of great toe; maintain foot in mid-sagittal plane.
Doctor:
Poistion: End of the table facing patient.
Brace: Plantar surface of proimal phalanx.
Contact: Dorsal surface of distal phalanx.
Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Sphenofrontal suture, posterior to eye.

NEUROLYMPHATIC: (Ant/L) Fourth I.C.S., outside mid-clavicular line.

VISCERAL ORGAN:

I. *Heart - Left Ventrical:* (Ant/L) Rectus abdominis, fourth section, near xiphoid.

II. *Urethra:* (Ant/BL) Belly of rectus femoris, medial to midline, lateral to sartorius muscle, superior to Sp 11.

M. A. P. : Si 8 1/3

V.L. : L2 R

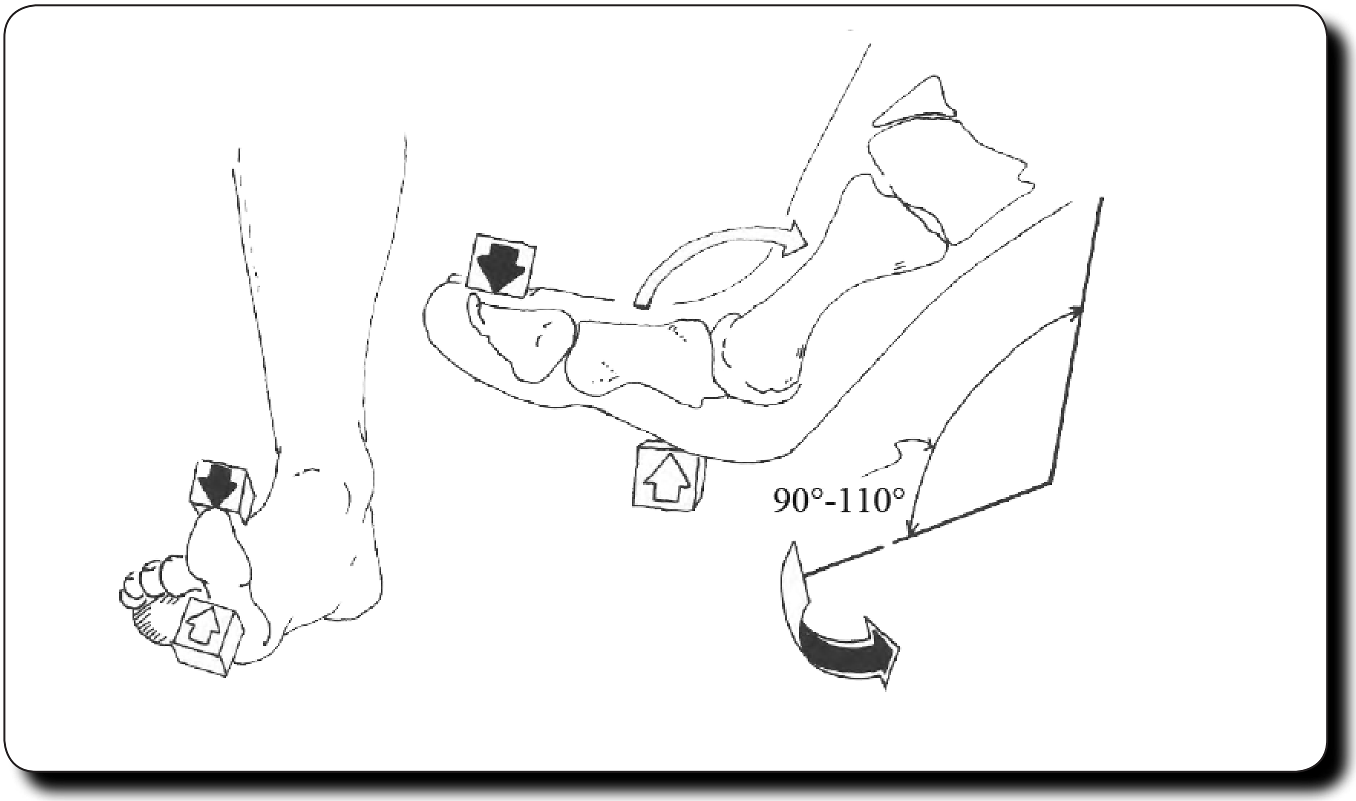
L. B. V.L. : C4 R

M. M. : S1

CRANIAL: Palatine

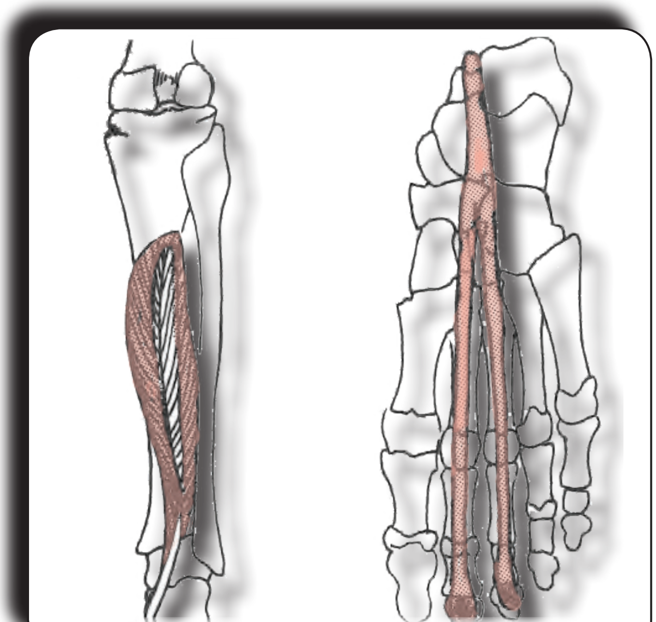
FOOT: First Metatarsal

NUTRIENT SOURCE: Magnesium
1. Core Magnesium (N.W.)
2. Magnesium Chelate (N.W.)
3. Min Chex (S)

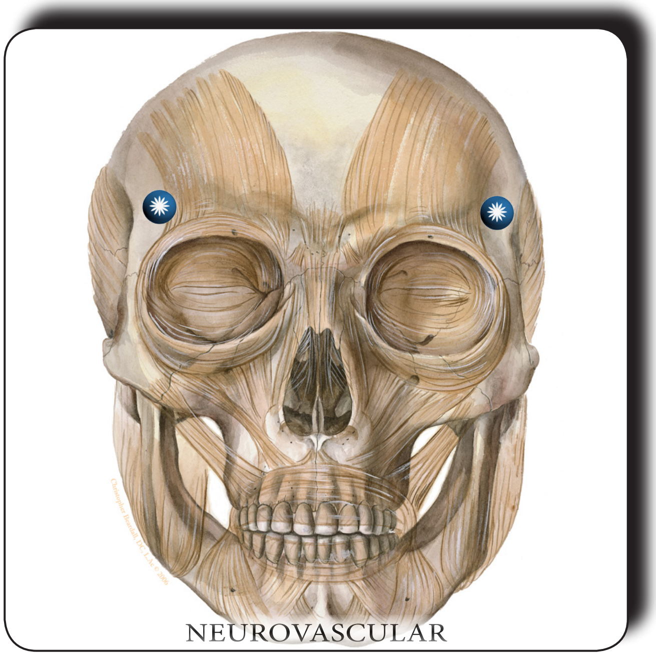


SECTION III:

TOES



FLEXOR DIGITORUM LONGUS, MEDIAL DIV.



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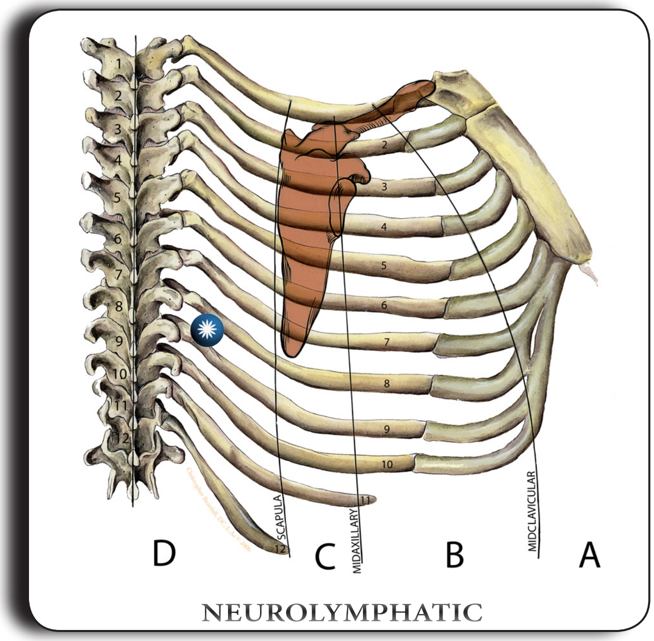

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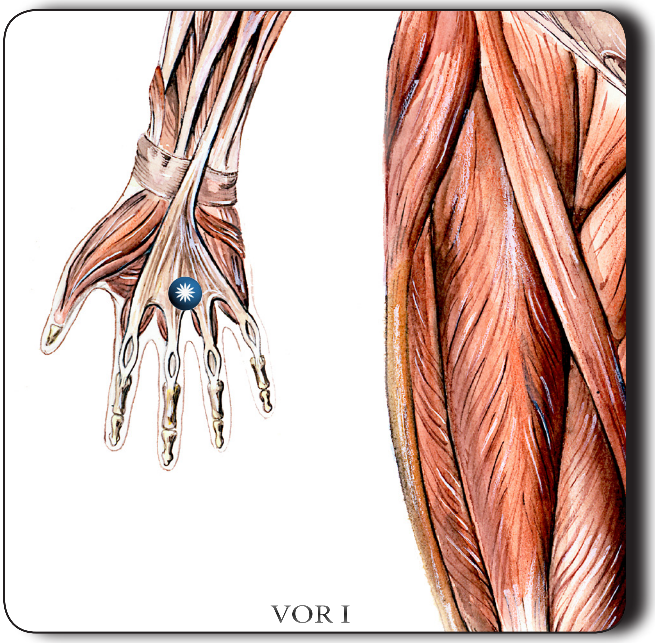
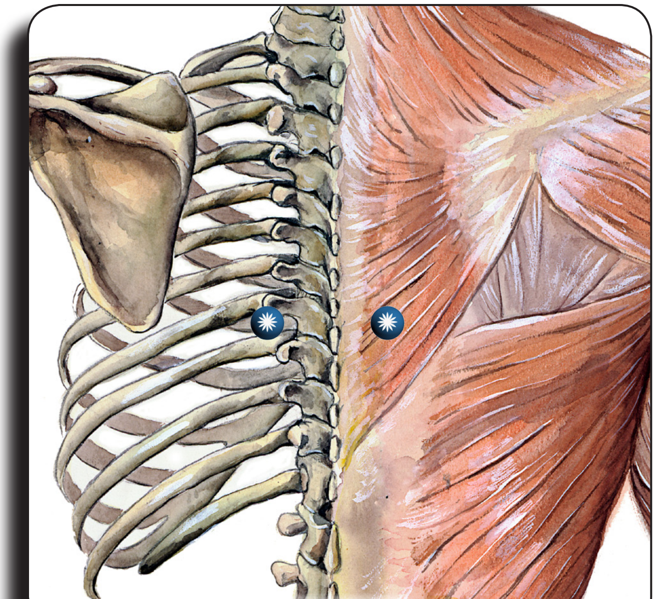
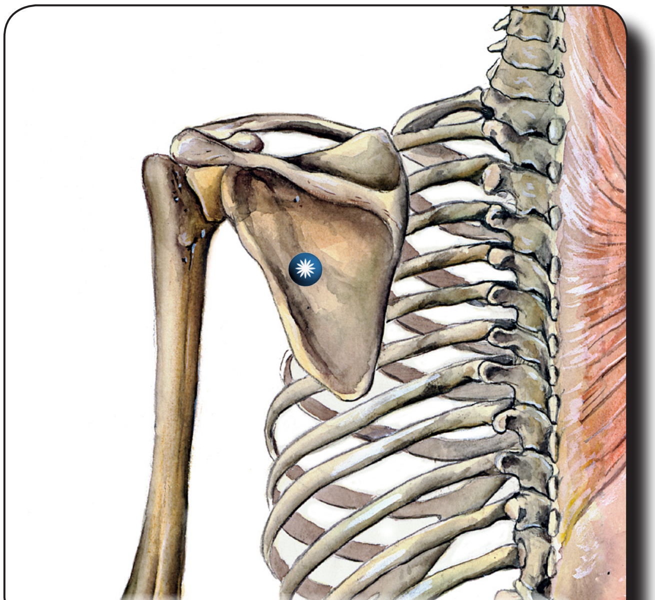
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 908: FLEXOR DIGITORUM LONGUS, (Medial Division)

ORIGIN: Posterior surface of the body of the tibia from the popliteal line to the inferior part of tibialis posterior origin.

INSERTION: Bases of the distal phalanges ofsecond and third toes.

ACTION: Plantar flexes distal phalanx of second and third toes. Assists in plantar flexion and supination of foot.

TEST:

Patient: Position: Supine.
M.T.P.: Plantar flex the distal phalanges of the second and third toes.
Doctor: Position: End of table facing patient.
Brace: Proximal dorsal surfaces of middle phalanges of second and third toes.
Contact: Plantar surfaces of distal phalanges of second and third toes.
Direction: Dorsiflex phalanges through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, lateral superior part,near the level of the frontal prominence.

NEUROLYMPHATIC: (Post/R) Eighth I.C.S., paraspinal, 2” from spine.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (R) Palmar side of hand between third and fourth metacarpals, distal end.

II. *Stomach:* (Post/BL) B 17, between T8 and T9 transverse processes.

M. A. P. : Si 11 1/4

V.L. : L4 R

L. B. V.L. : C2 R

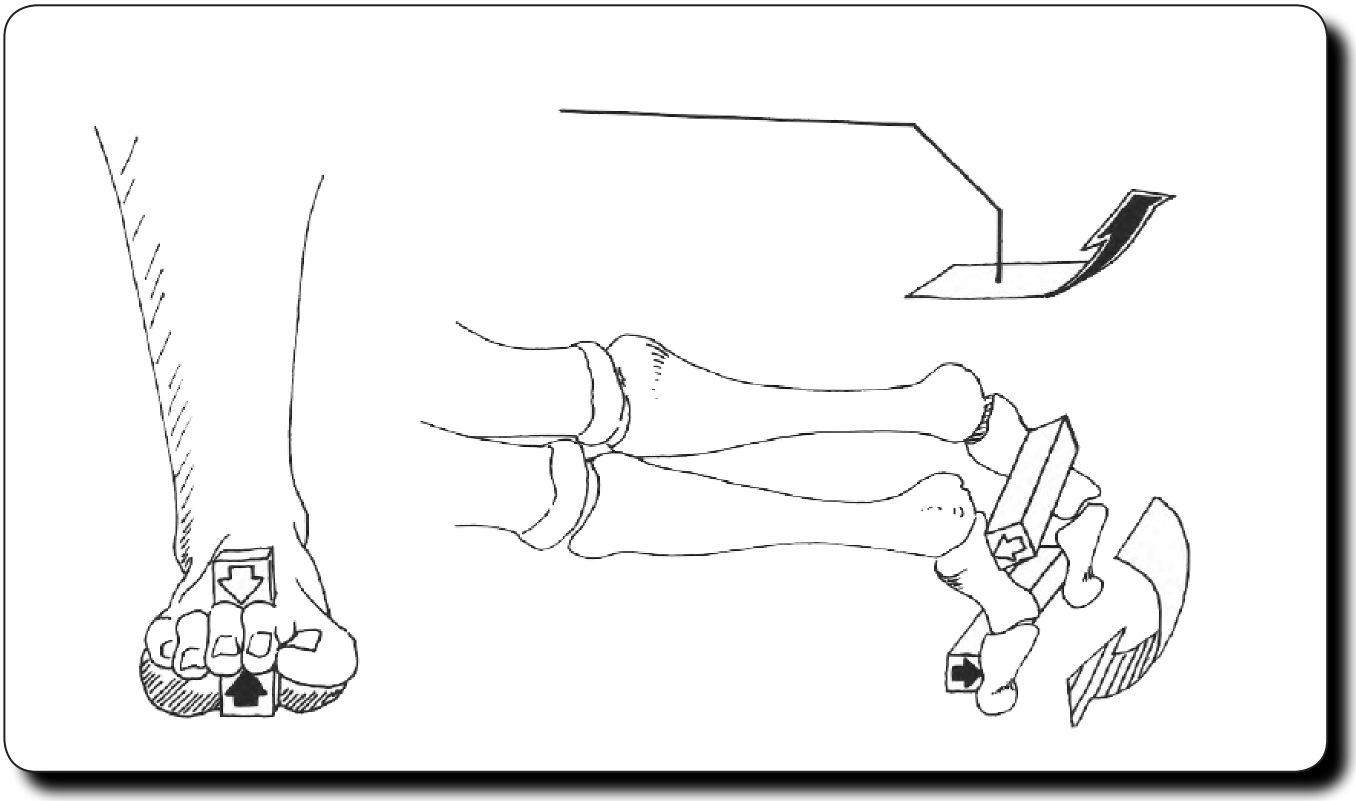
M. M. : S1

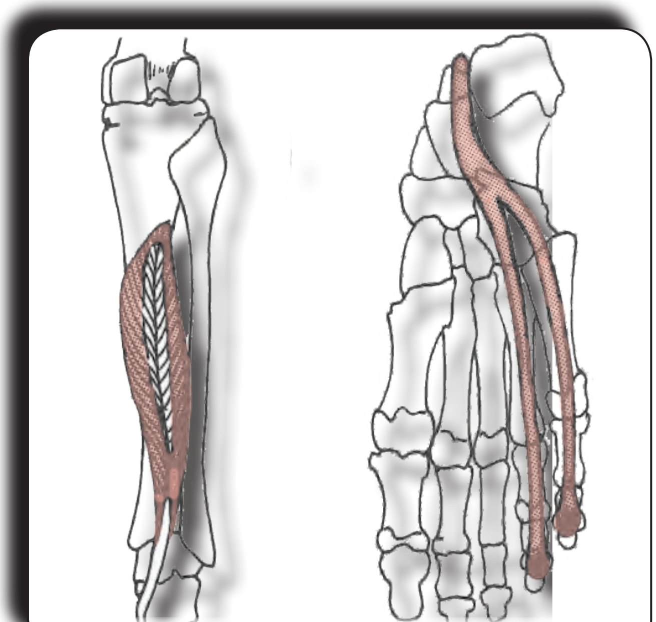
CRANIAL: Maxilla

FOOT: Third Metatarsal

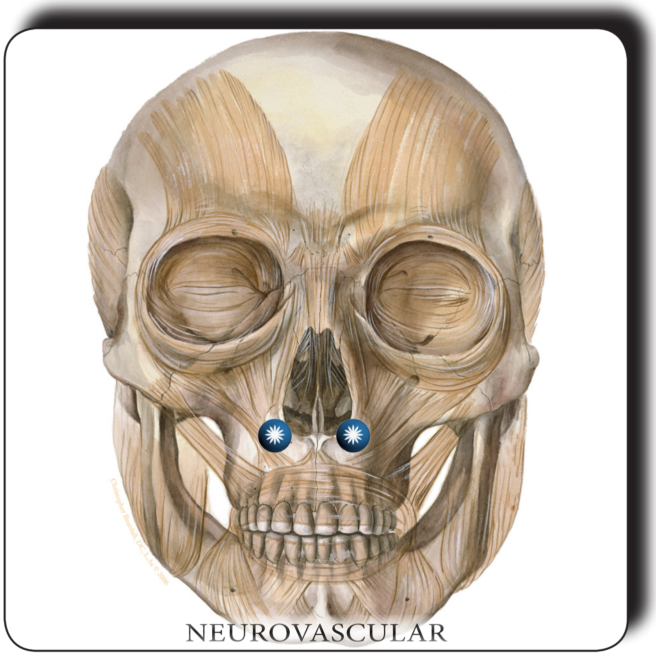
NUTRIENT SOURCE: Zinc

1. Chezyn (S)
2. Core Zinc (N.W.)
3. Zinc Chelate (N.W.)





FLEXOR DIGITORUM LONGUS, LATERAL DIV



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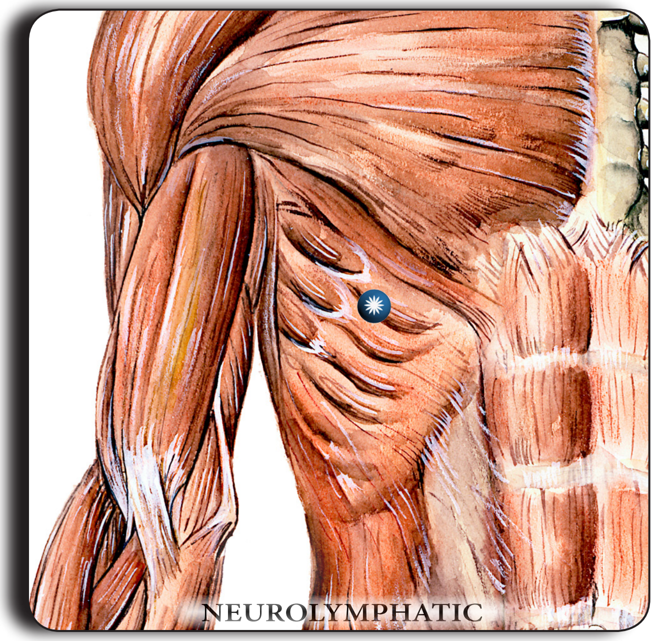

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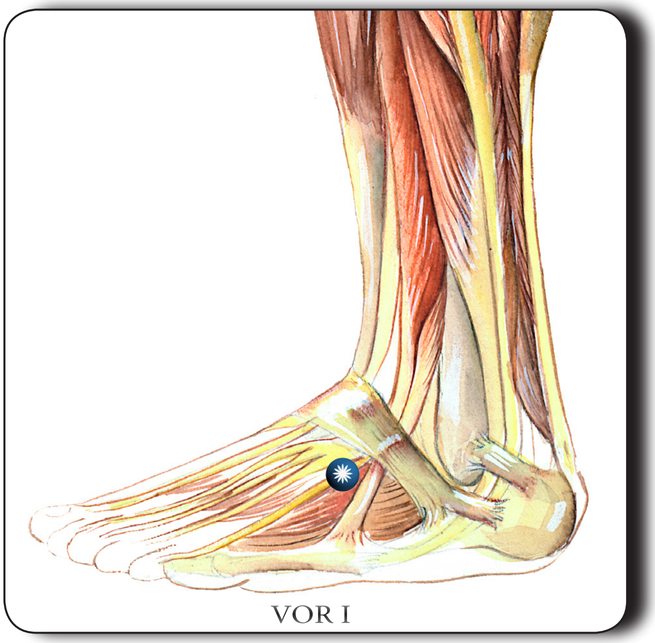
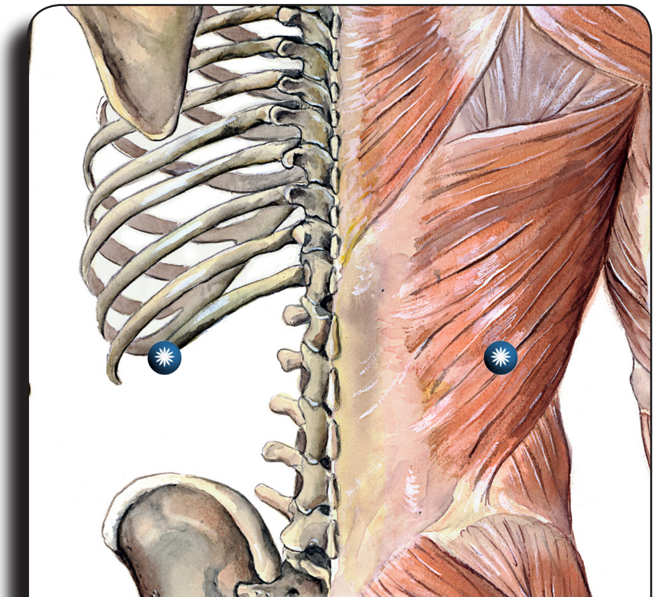
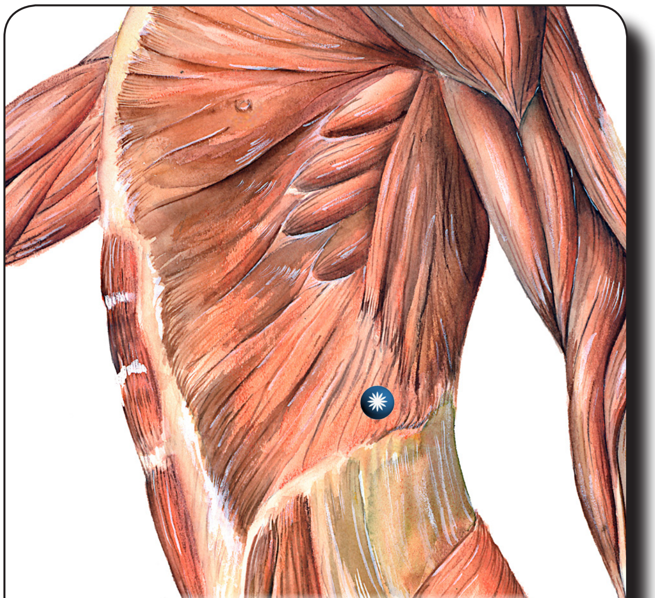


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 910: FLEXOR DIGITORUM LONGUS, (Lateral Division)

ORIGIN: Posterior part of tibia from the middle area inferiorly, middle 1/3 of tibia centrally.

INSERTION: Base of the distal phalanges of the fourth and fifth toes.

ACTION: Plantar flexes distal phalanges of the fourth and fifth toes. Assists in plantar flexion and supination of foot.

TEST:

Patient: Position: Supine.
M.T.P.: Plantar flex distal phalanges of the fourth and fifth toes.

Doctor: Position: End of table facing patient.
Brace: Dorsal surface of middle phalanges of fourth and fifth toes.
Contact: Plantar surfaces of distal phalanges of fourth and fifth toes.
Direction: Dorsiflex phalanges through mid -sagittal plane.

NEUROVASCULAR: (Ant/BL) Maxillary bone, just inferior and lateral to nose.

NEUROLYMPHATIC: (Ant/R) Sixth I.C.S., mid-clavicular line.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (Lat/BL) Superior medial surface of cuboid.

II. *Kidney:* (Post/BL) G 25, tip of twelfth rib.

M. A. P. : G 26 3/4

V.L. : T4 R

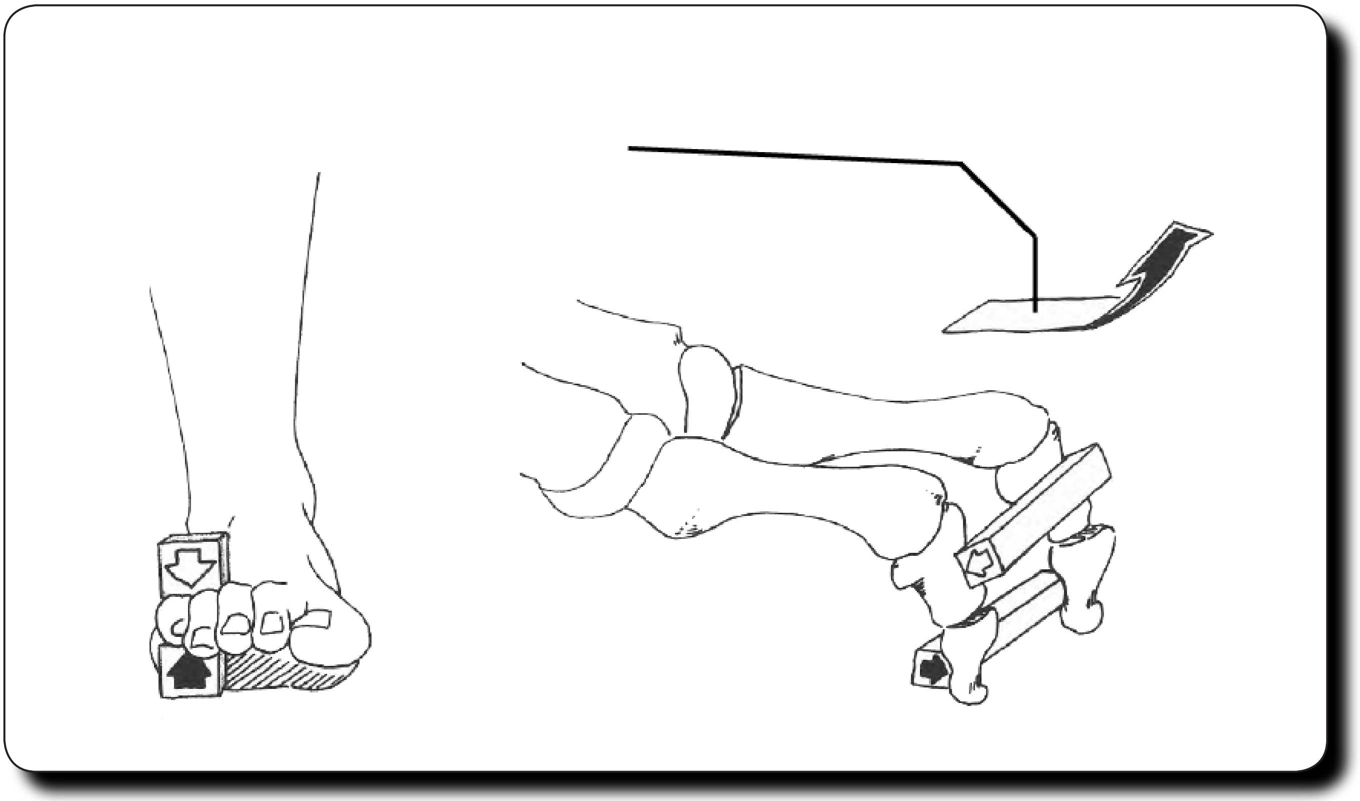
L. B. V.L. : T7 R

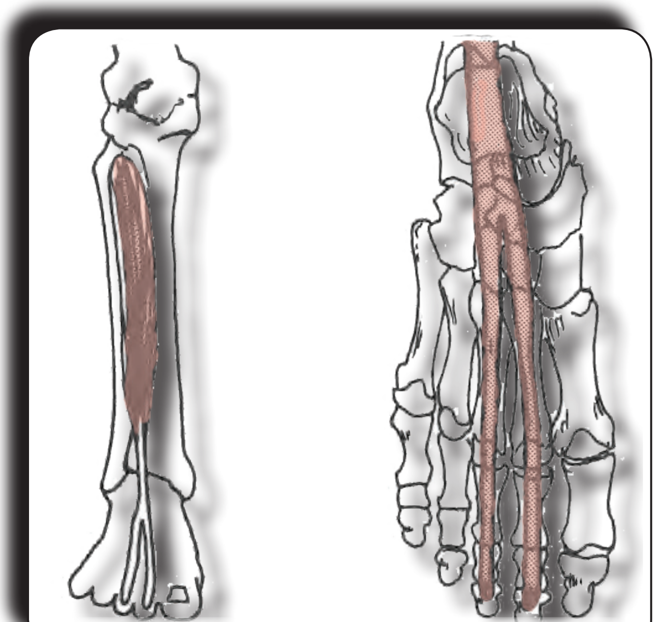
M. M. : S2

CRANIAL: Parietal

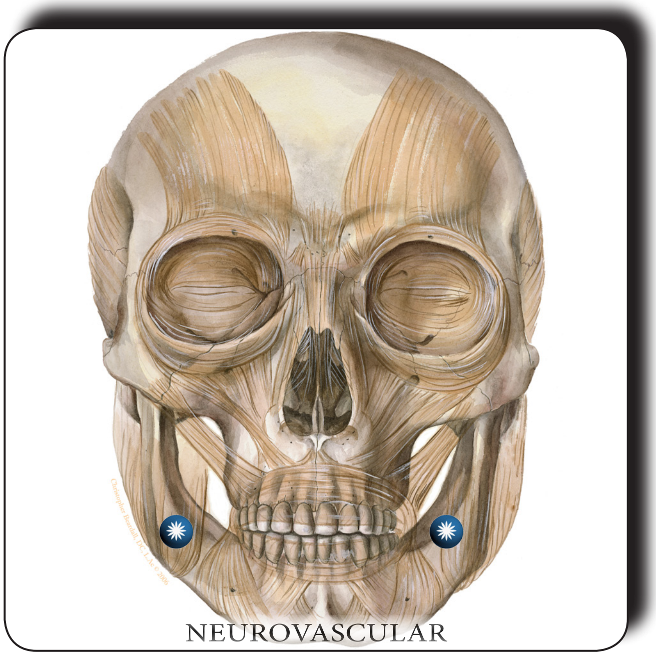
FOOT: Talus

NUTRIENT SOURCE: Hesperidin
1. Core Hesperidin





EXTENSOR DIGITORUM LONGUS, MEDIAL DIV.



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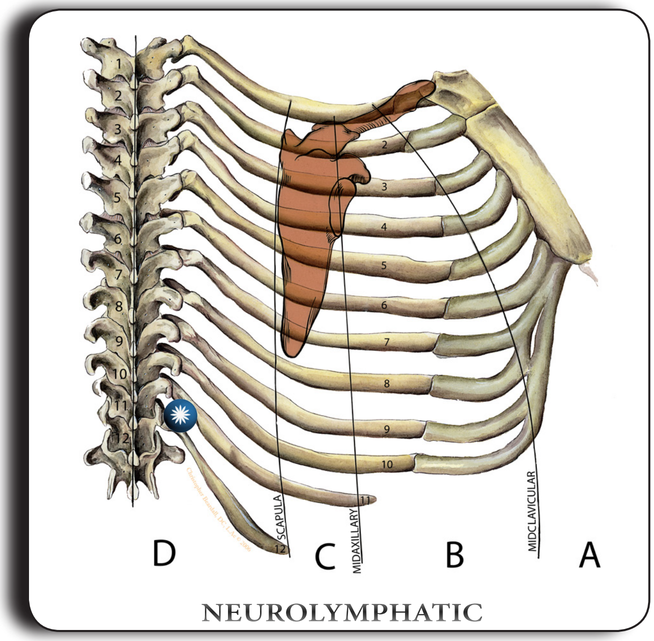
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MIDAXILLARY
MIDCLAVICULAR
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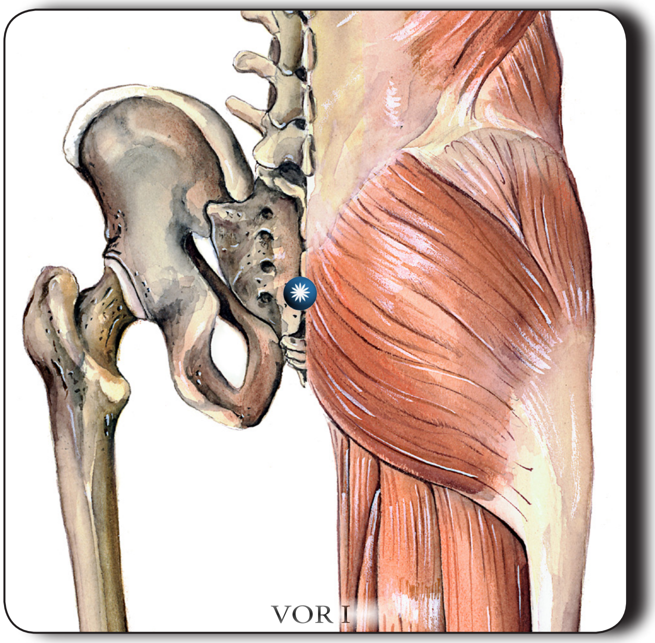
NEUROLYMPHATIC



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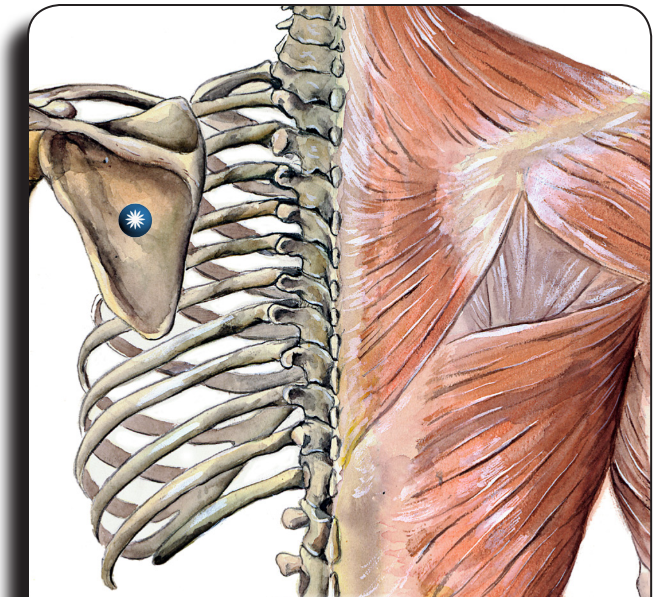

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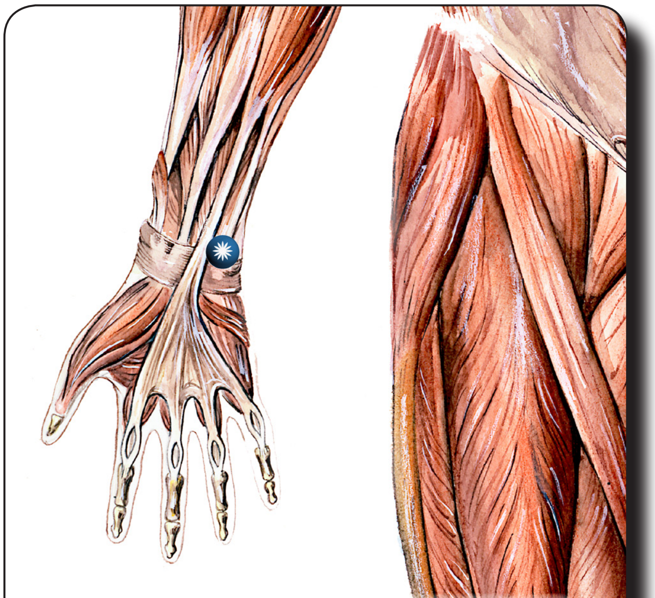


MUSCLE ACUPUNCTURE POINT

Muscle 912: EXTENSOR DIGITORUM LONGUS, (Medial Division)

ORIGIN:

1. Lateral condyle of tibia.
2. Proximal 2/3 of fibula.
3. Upper part of interosseous membrane.
4. Intramuscular septa.

INSERTION: Base of the middle phalanx of the second and third toes.

ACTION: Dorsiflexes the middle and distal phalanges of the second and third toes and with continued action dorsiflexes the foot.

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex middle and distal phalanges of second and third toes.
Doctor: Position: End of table facing patient.
Brace: Plantar aspect of the proximal phalanx.
Contact: Dorsal surface of middle phalanges.
Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Mandible, near angle of insertion of masseter.

NEUROLYMPHATIC: (Post/R) Eleventh I.C.S., at the spine.

VISCERAL ORGAN:

I. *Prostate/Uterus:* (Post/Midline) Gv 21/2

II. *Heart:* (Post/L) Middle of scapula.

M. A. P. : H 6

V.L. : T10 L

L. B. V.L. : T1 L

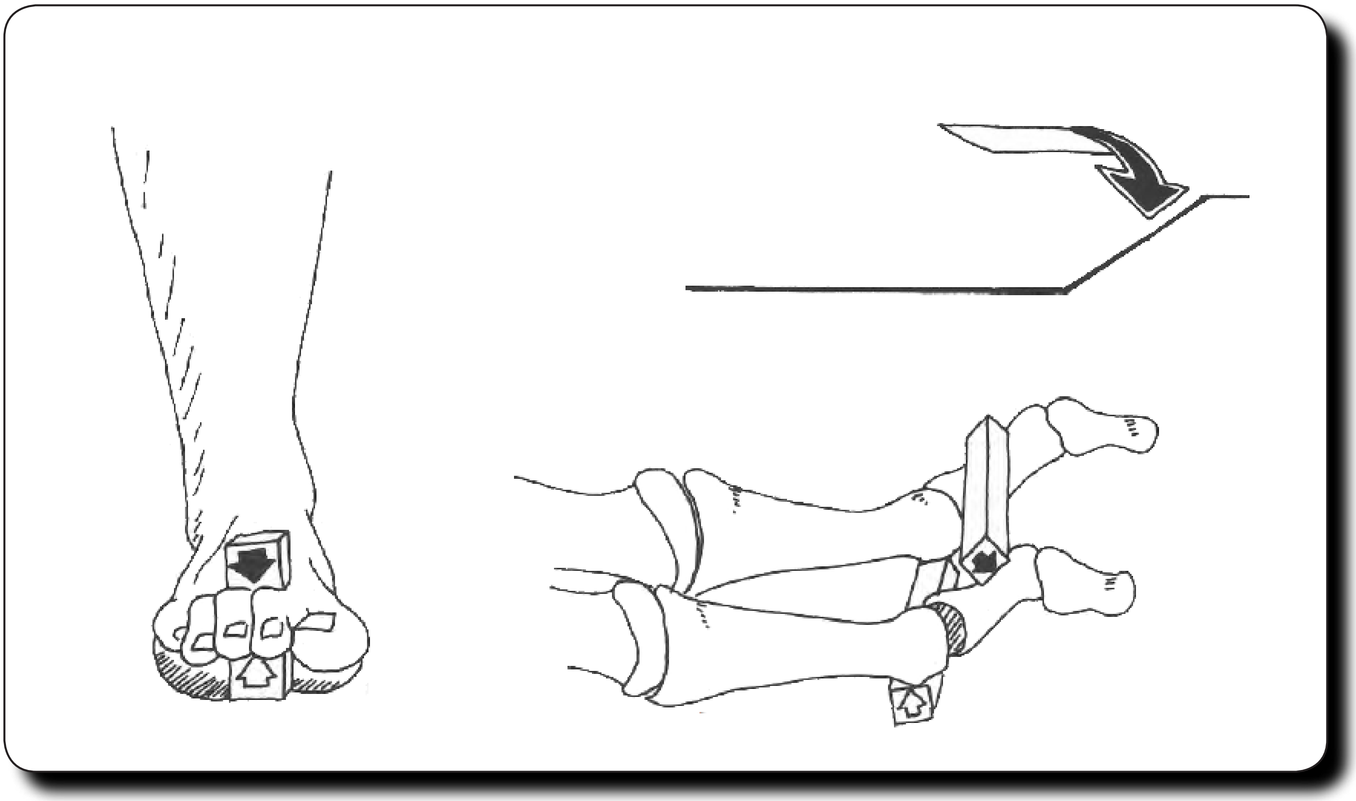
M. M. : L5

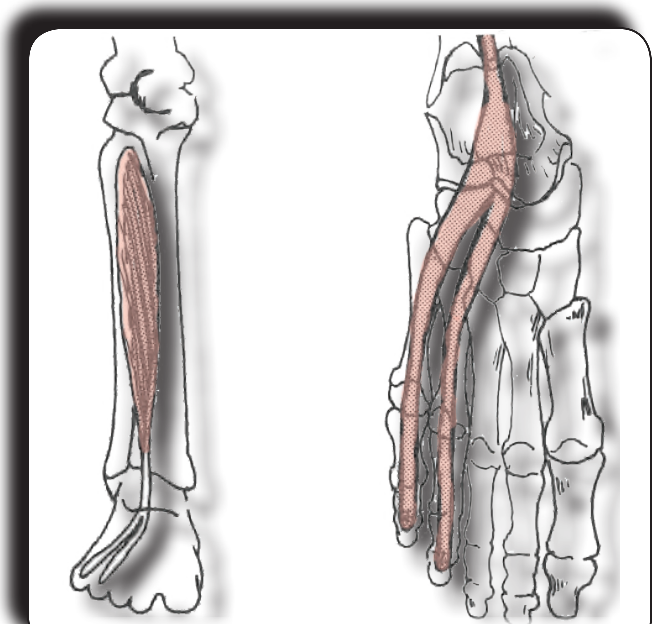
CRANIAL: Maxillary Bone

FOOT: Second Metatarsal

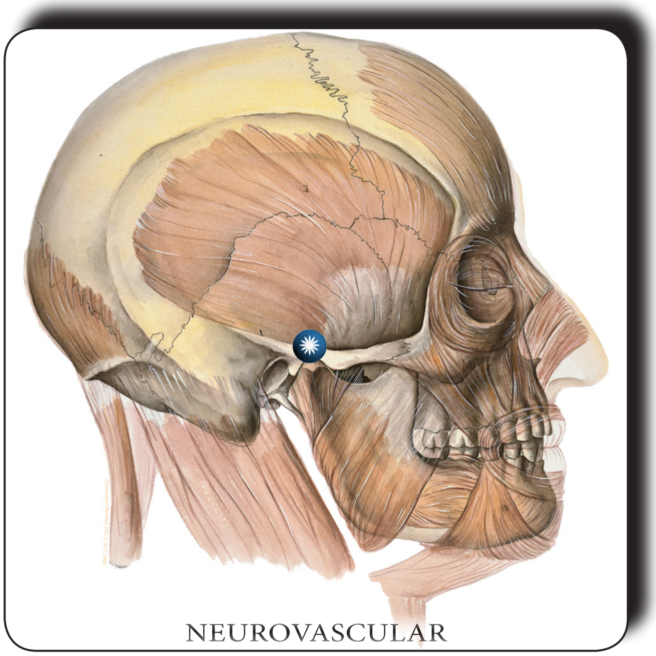
NUTRIENT SOURCE: Copper

1. Core Copper (N.W.)
2. Copper Chelate (N.W.)
3. Allorganic Trace Minerals (S)





EXTENSOR DIGITORUM LONGUS, LATERAL DIV.



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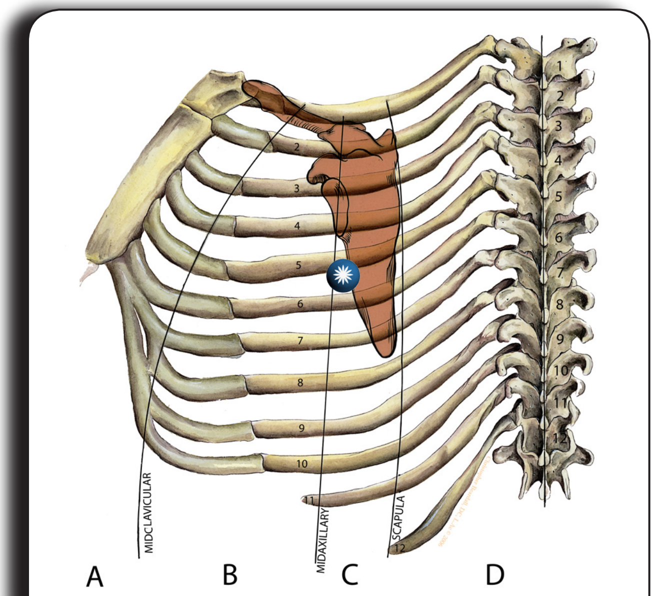
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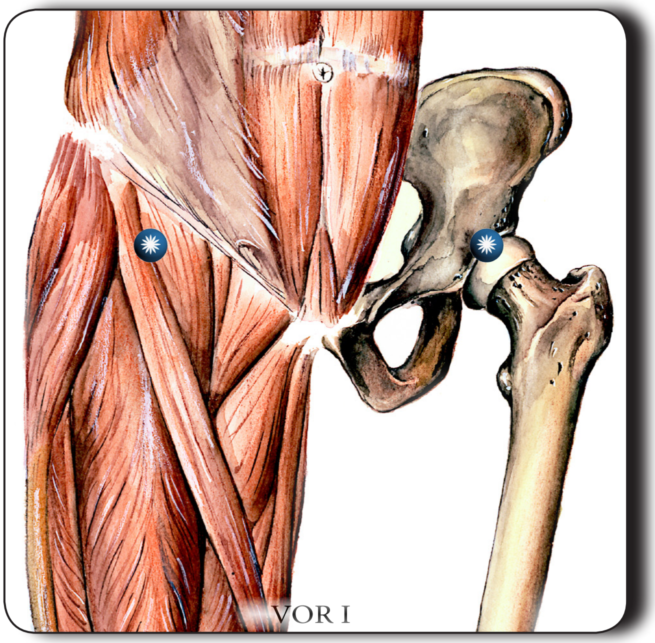
NEUROLYMPHATIC



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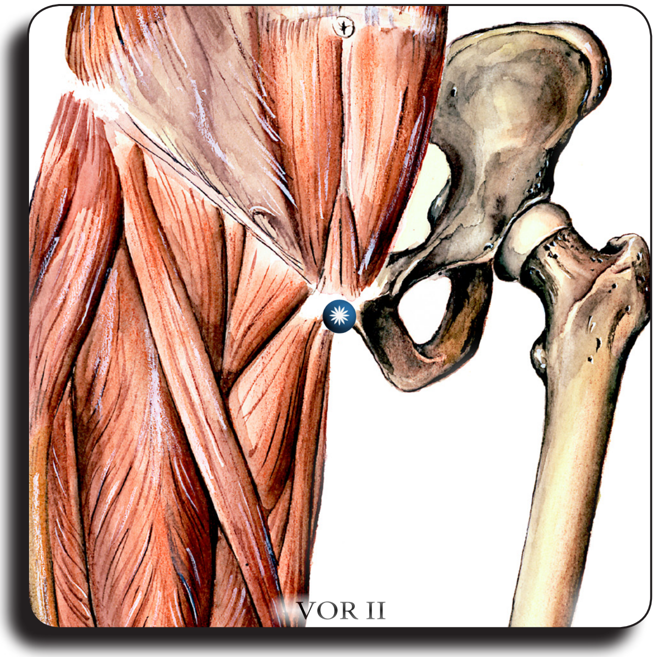

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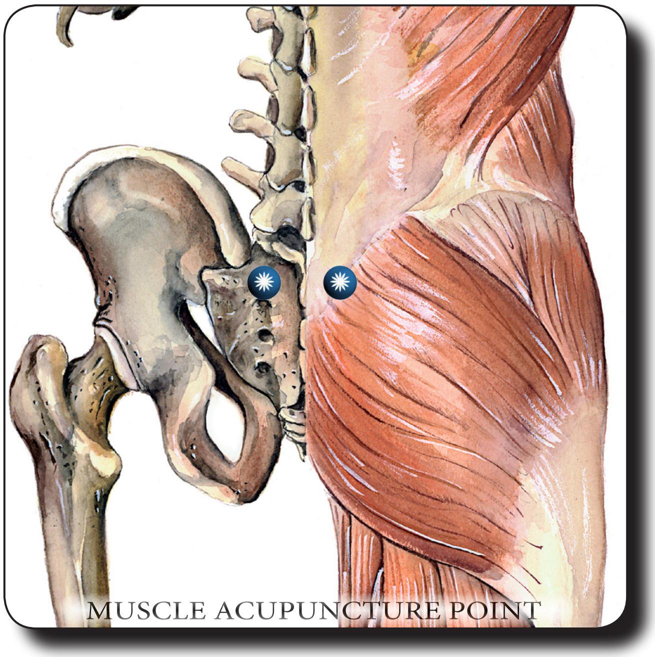


MUSCLE ACUPUNCTURE POINT

Muscle 914: EXTENSOR DIGITORUM LONGUS, (Lateral Division)

ORIGIN: Upper 3/4 of the anterior surface of the fibula.

INSERTION: Base of the middle phalanx of the fourth and fifth toes.

ACTION: Dorsiflexes middle and distal phalanges of fourth and fifth toes.

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex middle and distal phalanges of fourth and fifth toes.

Doctor: Position: End of table facing patient.
Brace: Palmar aspect of the proximal phalanx.
Contact: Dorsal surface of middle phalanges.
Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Temporal bone, zygomatic process, just anterior to ear.

NEUROLYMPHATIC: (Post/L) Fifth I.C.S., parahumeral, 6-8” from spine.

VISCERAL ORGAN:

I. *Thyroid:* (Ant/BL) Acetabulum, external anterior lip.

II. *Posterior Pituitary:* (Ant/Midline) Cv 1.3.

M. A. P. : B 27

V.L. : T10 L

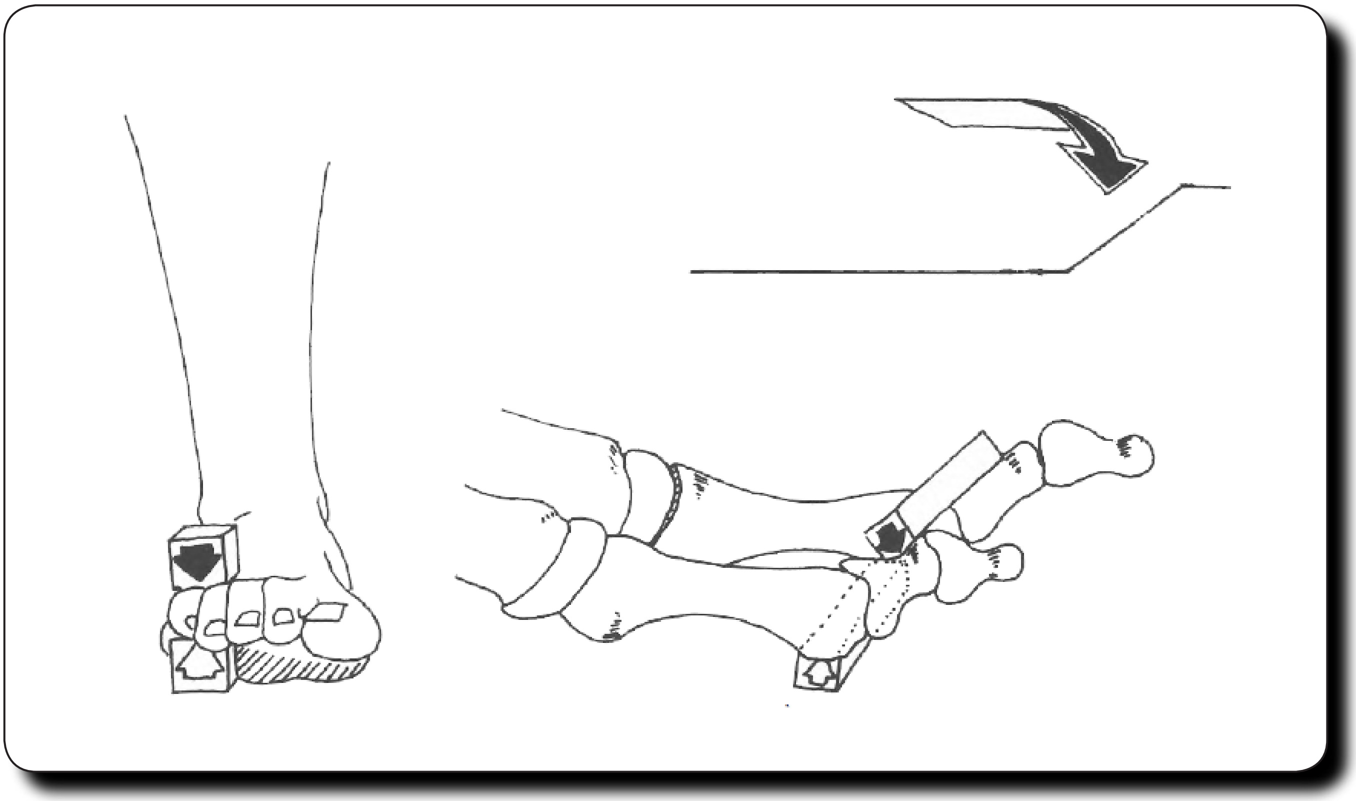
L. B. V.L. : T1 L

M. M. : S1

CRANIAL: Occiput

FOOT: Calcaneus

NUTRIENT SOURCE: Magnesium
1. Core Magnesium (N.W.)
2. Magnesium Chelate (N.W.)
3. Min Chex (S)

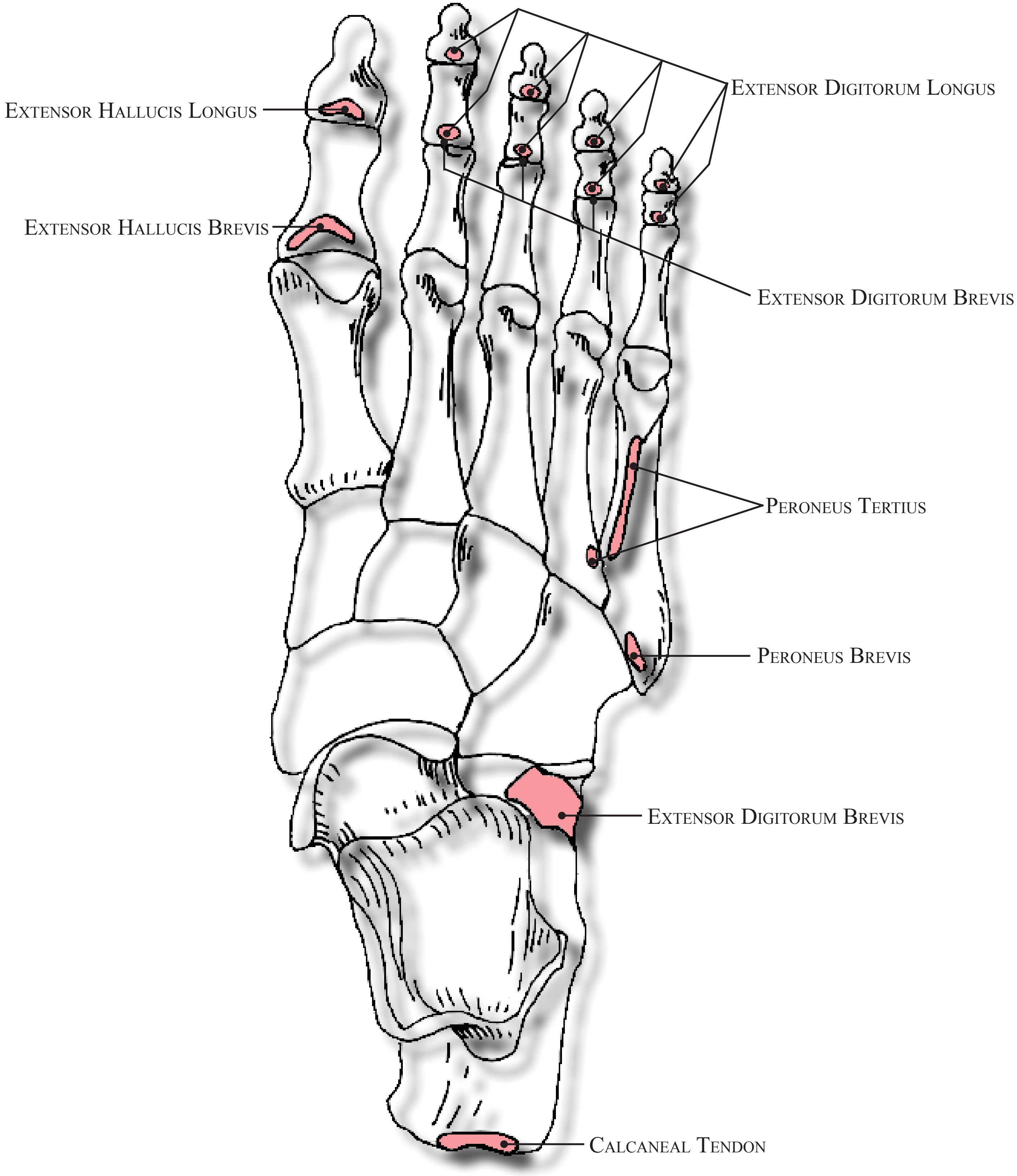


CHAPTER III

INTRINSIC MUSCLES OF THE FOOT

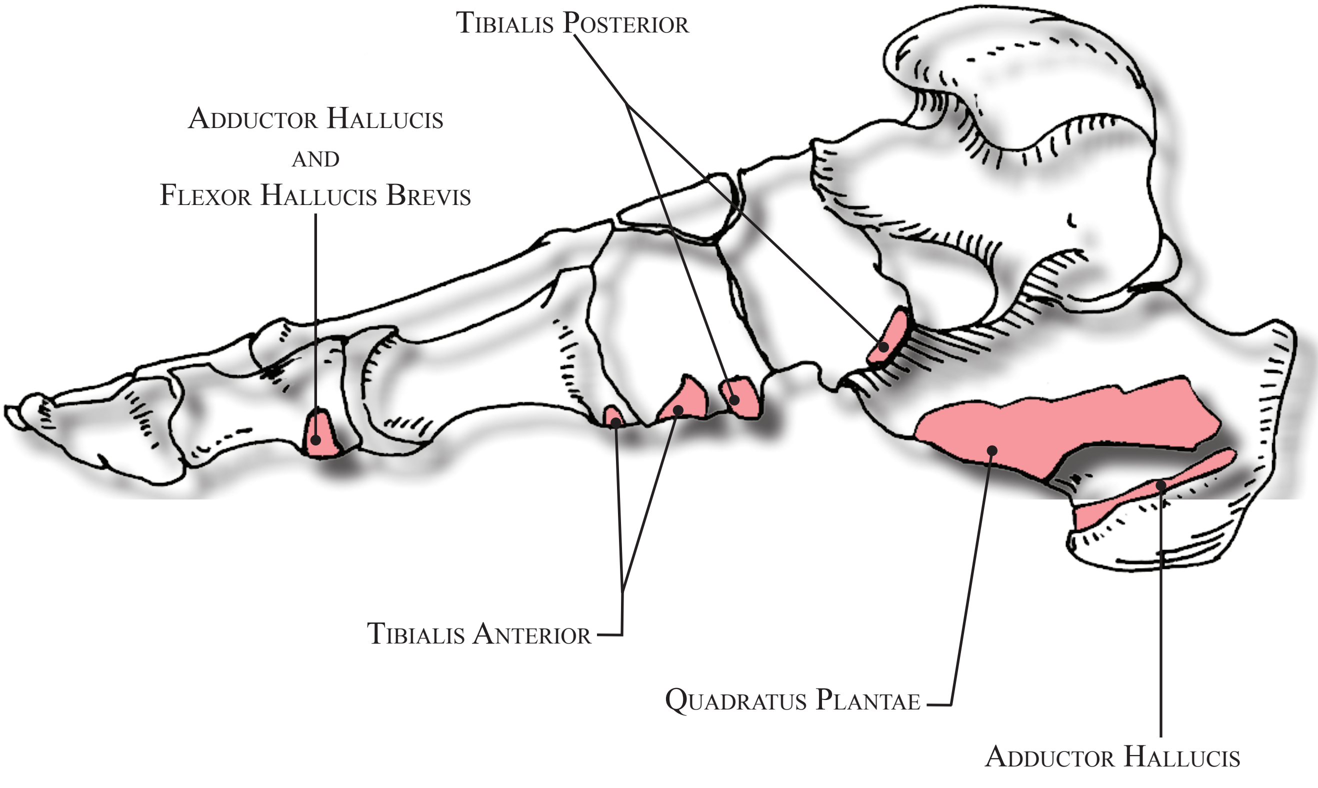
ORIGIN AND INSERTION

CALF AND FOOT MUSCLES


EXTENSOR HALLUCIS LONGUS
EXTENSOR DIGITORUM LONGUS
EXTENSOR HALLUCIS BREVIS
EXTENSOR DIGITORUM BREVIS
PERONEUS TERTIUS
PERONEUS BREVIS
EXTENSOR DIGITORUM BREVIS
CALCANEAL TENDON

SUPERIOR VIEW OF FOOT

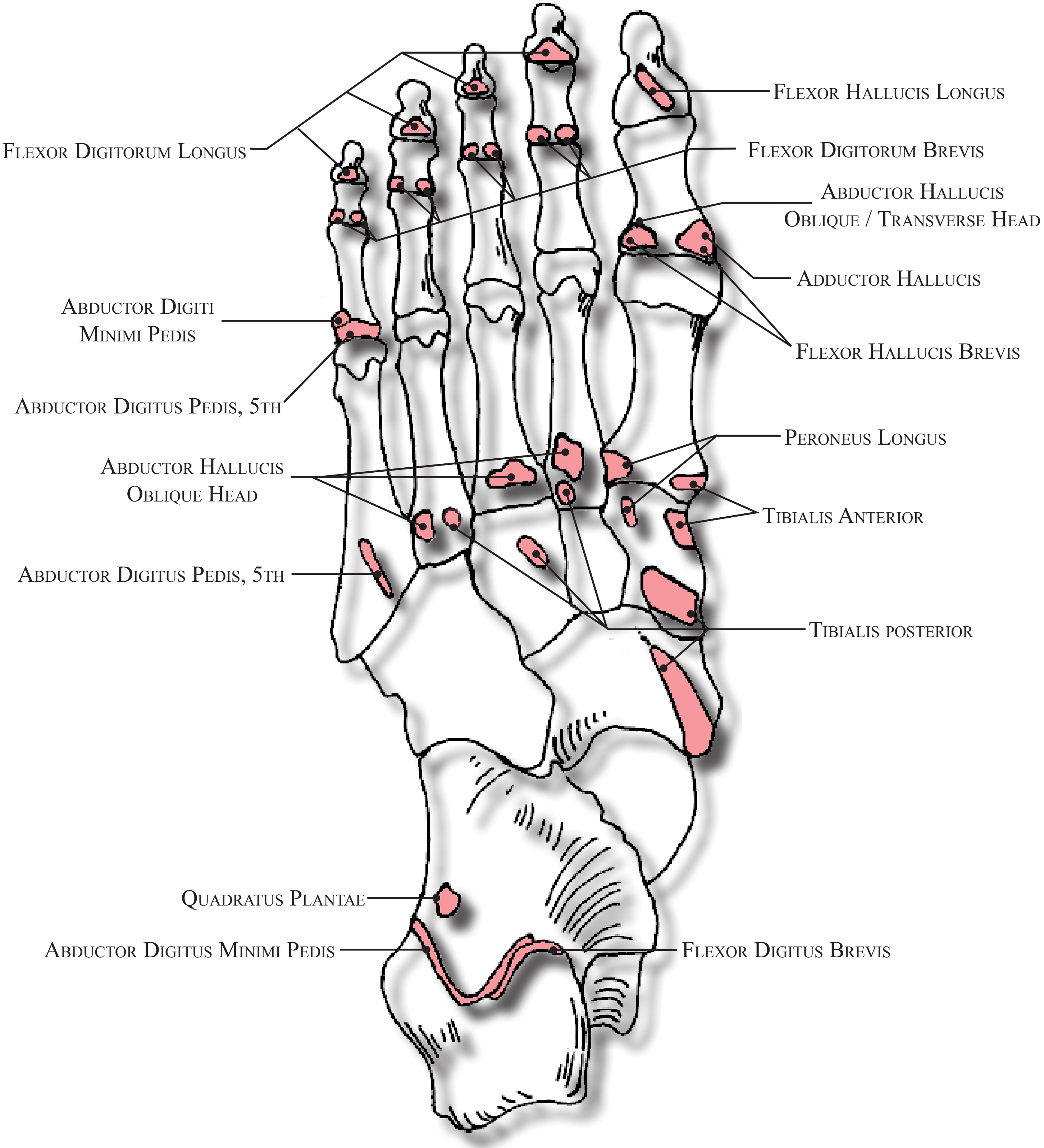
CALF AND FOOT MUSCLES


TIBIALIS POSTERIOR
ADDUCTOR HALLUCIS
AND
FLEXOR HALLUCIS BREVIS
TIBIALIS ANTERIOR
QUADRATUS PLANTAE
ADDUCTOR HALLUCIS

MEDIAL VIEW OF FOOT

ORIGIN AND INSERTION

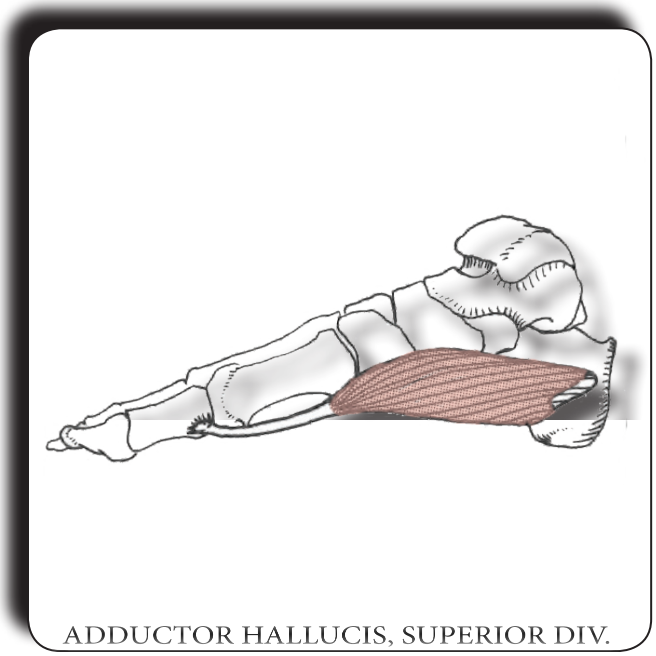
CALF AND FOOT MUSCLES

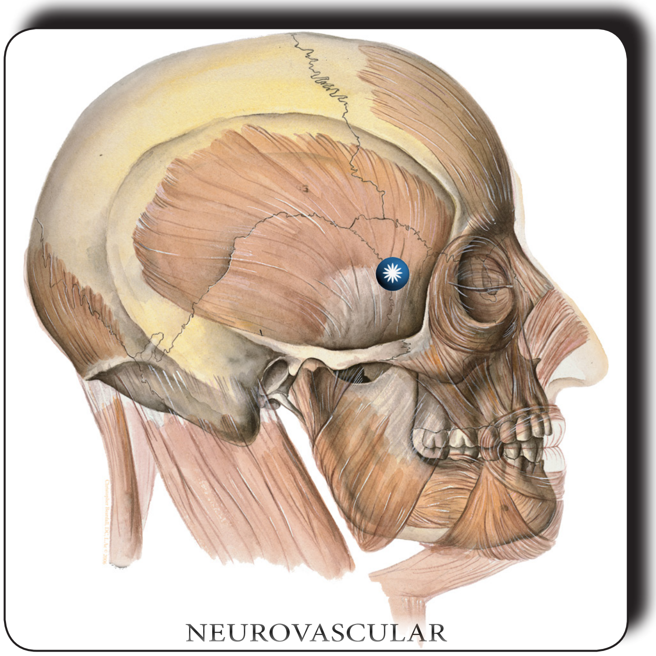

FLEXOR DIGITORUM LONGUS
FLEXOR HALLUCIS LONGUS
FLEXOR DIGITORUM BREVIS
ABDUCTOR HALLUCIS OBLIQUE / TRANSVERSE HEAD
ADDUCTOR HALLUCIS
ABDUCTOR DIGITI MINIMI PEDIS
FLEXOR HALLUCIS BREVIS
ABDUCTOR DIGITUS PEDIS, 5TH
PERONEUS LONGUS
ABDUCTOR HALLUCIS OBLIQUE HEAD
TIBIALIS ANTERIOR
ABDUCTOR DIGITUS PEDIS, 5TH
TIBIALIS POSTERIOR
QUADRATUS PLANTAE
ABDUCTOR DIGITUS MINIMI PEDIS
FLEXOR DIGITUS BREVIS

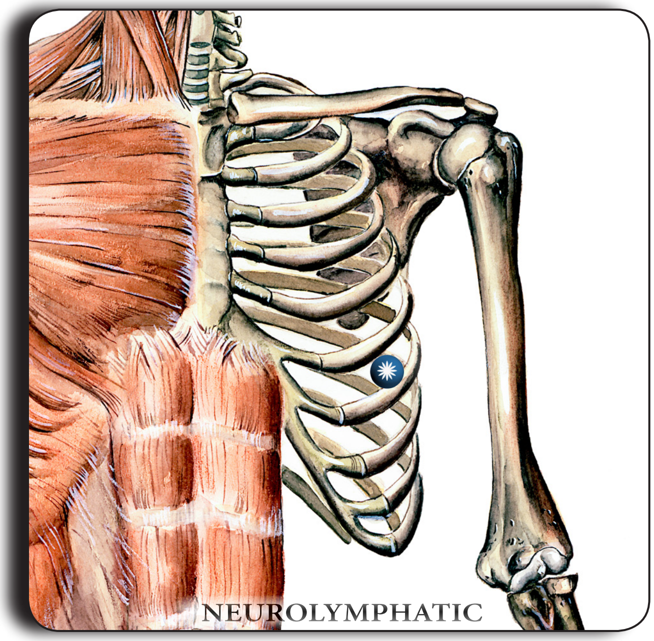
PLANTAR VIEW OF RIGHT FOOT

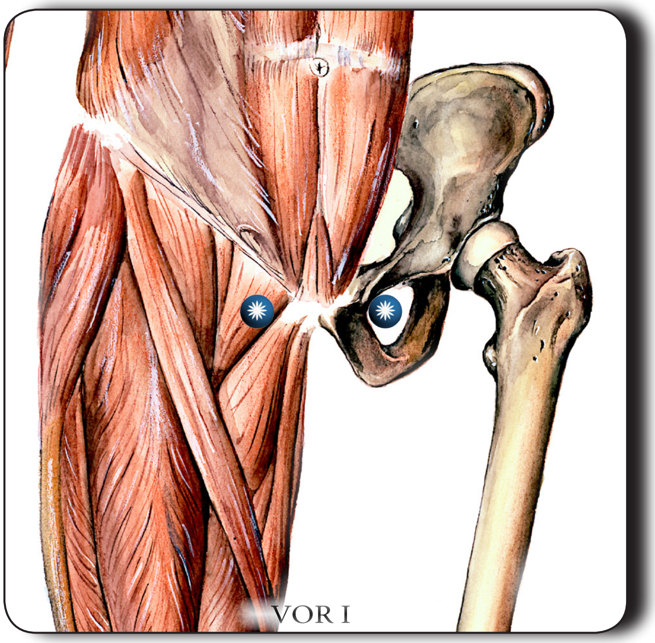
SECTION I:

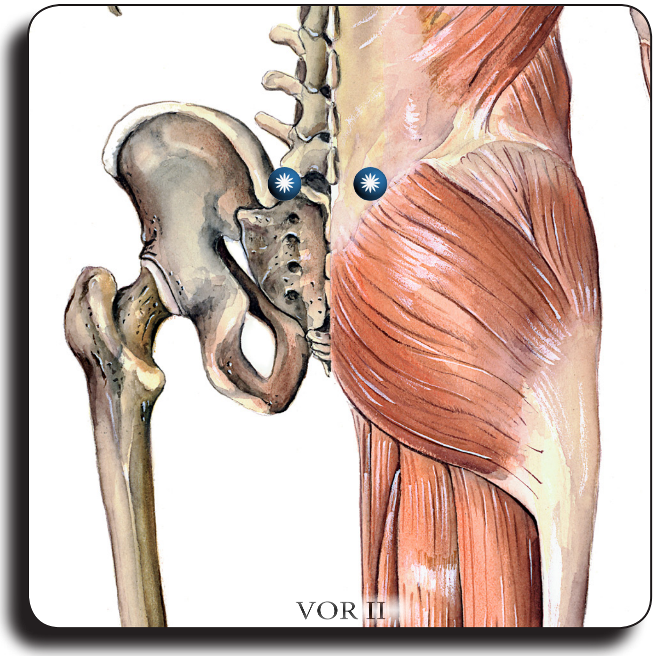
BIG TOES

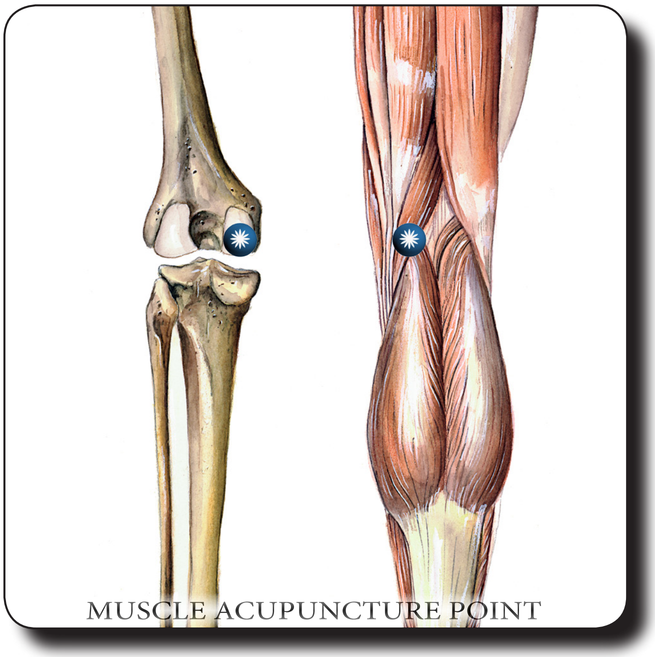

ADDUCTOR HALLUCIS, SUPERIOR DIV.


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 920: ADDUCTOR HALLUCIS, (Abductor Hallucis, Superior Division)

ORIGIN: Medial process of the tuberosity of calcaneus, laciniate ligament.

INSERTION: Medial tendon of the base of the proximal phalanx of the great toe.

ACTION: Adducts the great toe. Assists in foot adduction, inversion and supination. Stabilizes the longitudinal arch.

TEST:

Patient: Position: Supine.
M.T.P.: Foot in 90 degrees dorsiflexion, 45 degrees adduction and inverted. Flex great toe.

Doctor: Position: End of table facing patient.
Brace: Lateral aspect of calcaneus.
Contact: Medial aspect of first metatarsal.
Direction: Evert and abduct foot.

NEUROVASCULAR: (Lat) Sphenosquamosal suture, middle part of the greater wing.
NEUROLYMPHATIC: (Ant/L) Sixth I.C.S., past mid-clavicular line.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (Ant/BL) Middle of obturator foramina.

II. *Prostate/Uterus:* (Post/BL) B 25; level of L5 - S1 junction.

M. A. P. : K 10

V.L. : L3 L

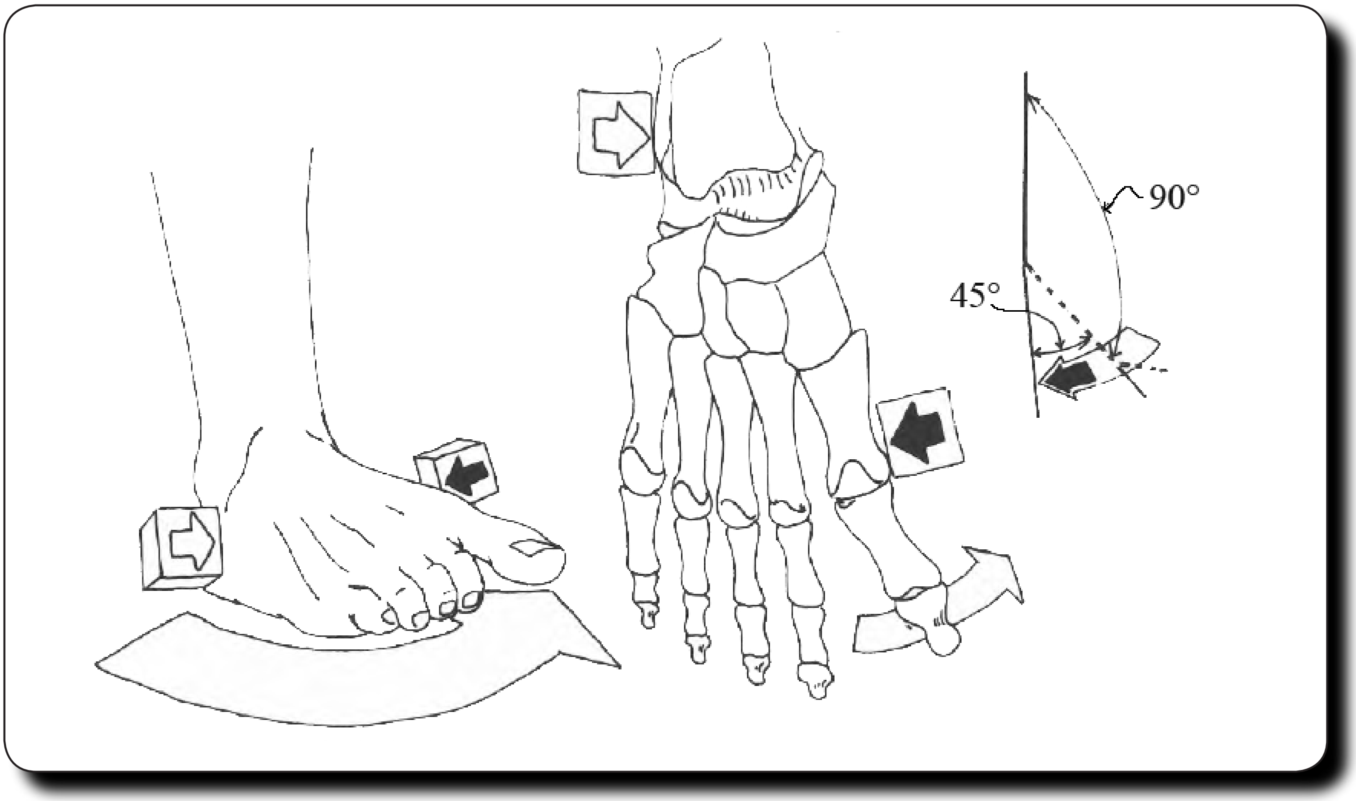
L. B. V.L. : C3 L

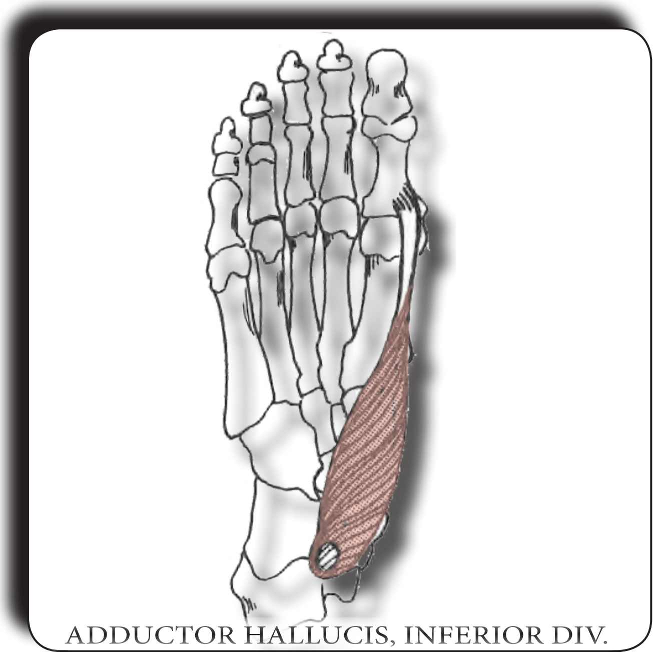
M. M. : S1

CRANIAL: Ethmoid

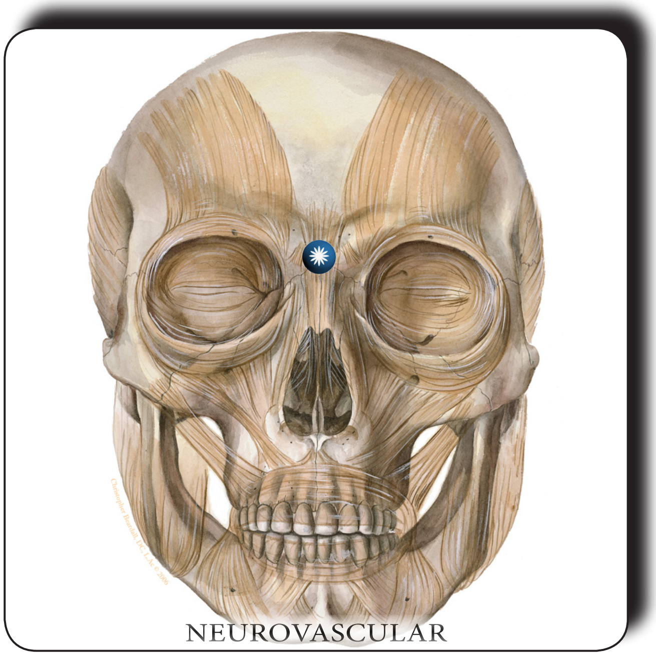
FOOT: First Cuneiform

NUTRIENT SOURCE: Potassium
1. Organic Minerals (S)
2. Core Potassium (N.W.)
3. Aspartic K (N.W.)

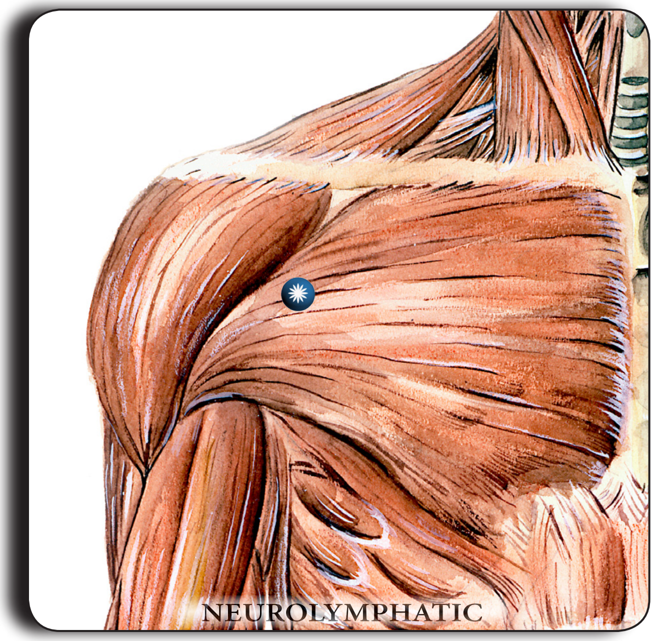




ADDUCTOR HALLUCIS, INFERIOR DIV.



NEUROVASCULAR



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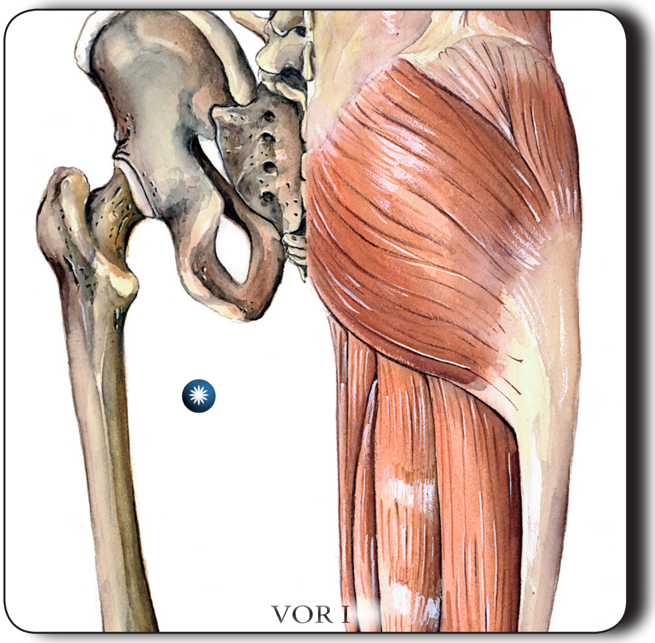
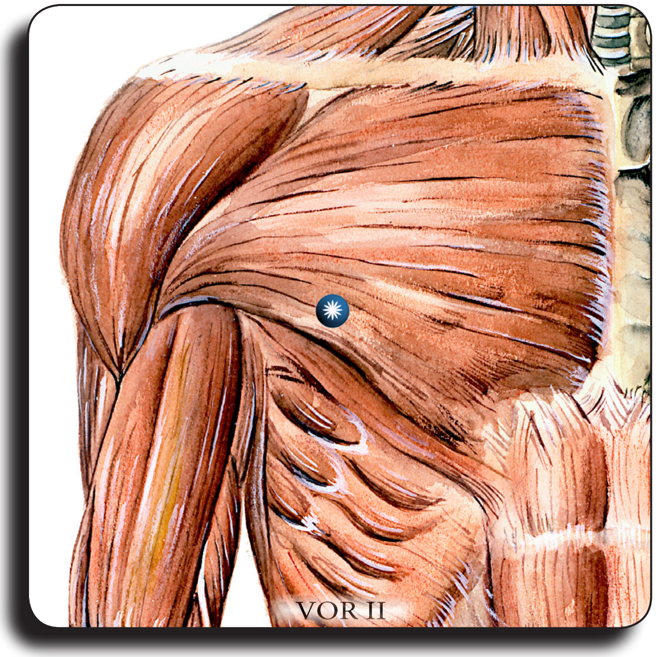
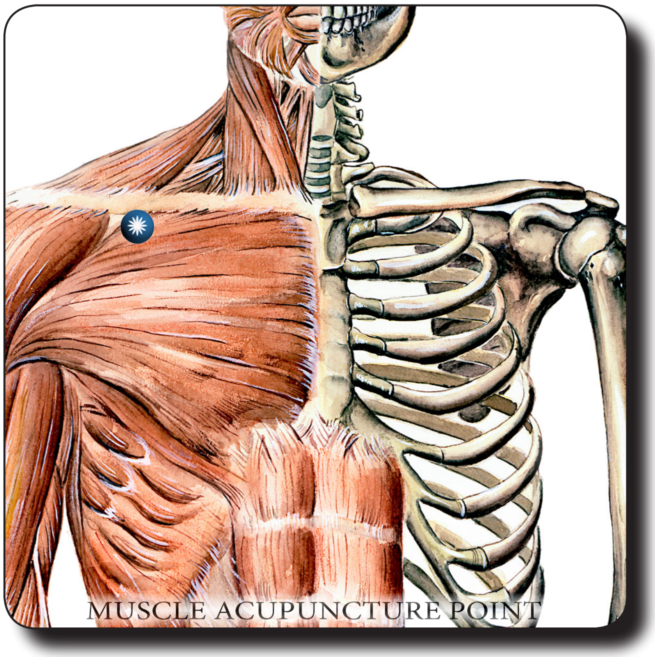


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 922: ADDUCTOR HALLUCIS, (Abductor Hallucis, Inferior Division)

ORIGIN: From calcaneus plantar aponeurosis, intermuscular septum and flexor digitorum brevis.

INSERTION: Tibial side of the base of the proximal phalanx of great toe.

ACTION: Flexes and adducts the great toe. Assists in foot supination.

TEST:

Patient: Position: Supine.
M.T.P.: Foot in 110 degrees dorsiflexion; flex and adduct great toe, slightly plantar flex and invert foot.

Doctor: Position: End of table facing patient.
Brace: Lateral aspect of calcaneus.
Contact: Medial aspect of first metatarsal.
Direction: Abduct foot.

NEUROVASCULAR: (Ant/Midline) Junction of nasal and frontal bones; bridge of nose midline.

NEUROLYMPHATIC: (Ant/R) Second I.C.S., 4-6" lateral to sternum.

VISCERAL ORGAN:

I. *Heart:* (Post/L) B 50; junction of gluteus maximus and hamstrings.

II. *Liver:* (Ant/R) Cx 1; fifth rib, just lateral to nipple.

M. A. P. : L 2

V.L. : L3 L

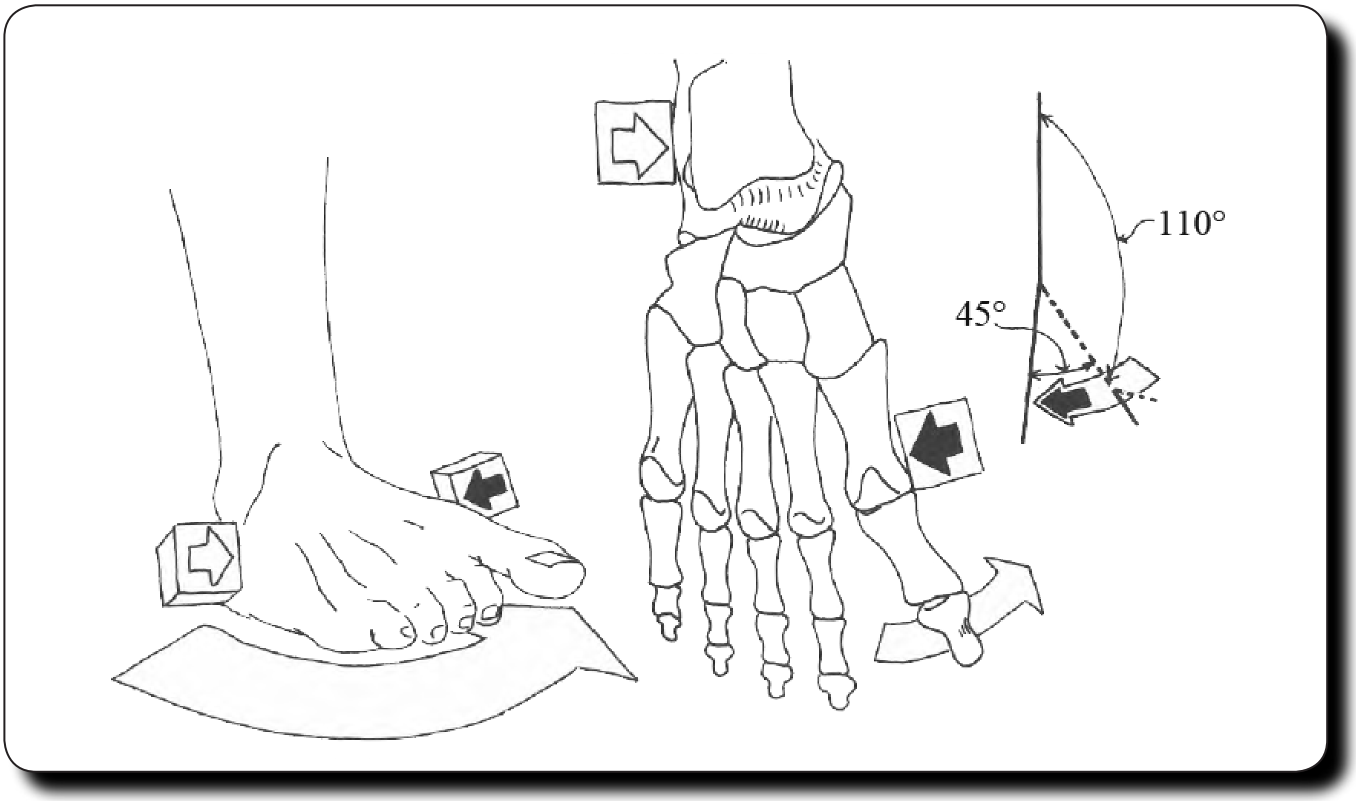
L. B. V.L. : C3 L

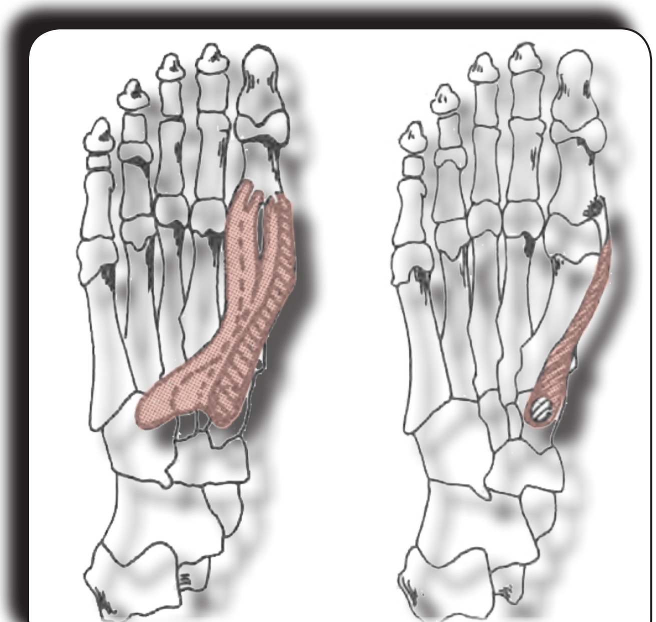
M. M. : S1

CRANIAL: Maxillary

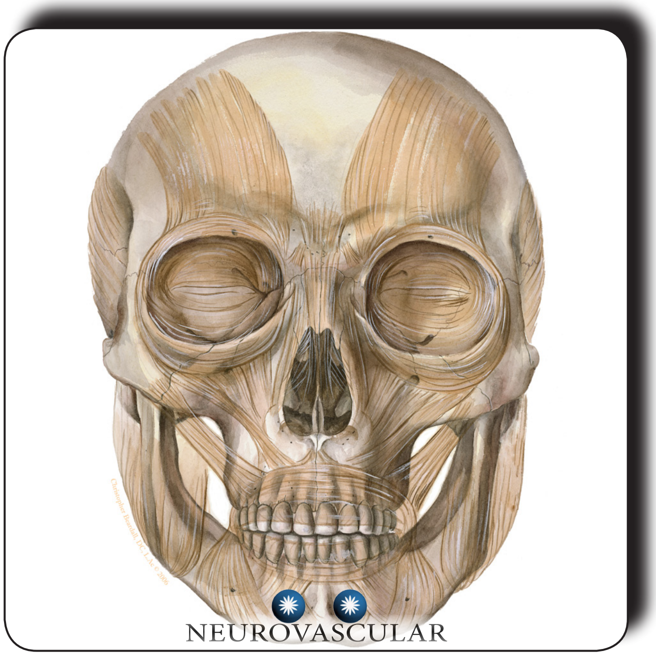
FOOT: Fifth Metatarsal

NUTRIENT SOURCE: Potassium
1. Organic Minerals (s)
2. Core Potassium (N.W.)
3. Aspartic K (N.W.)

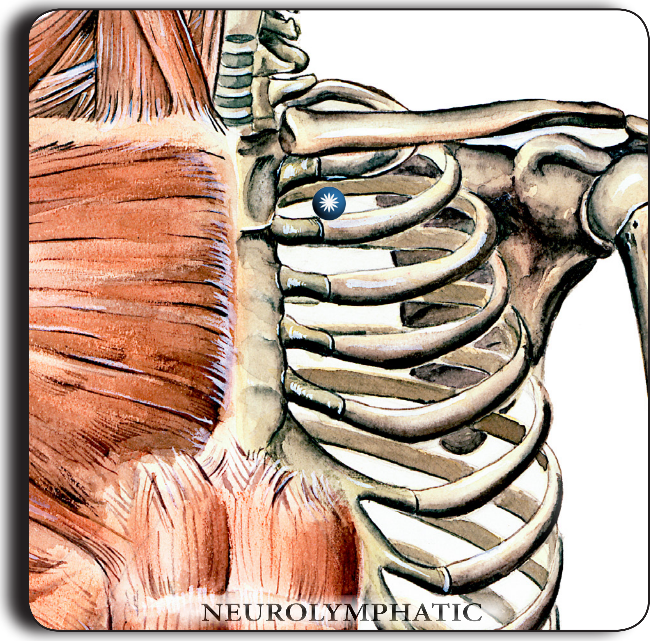




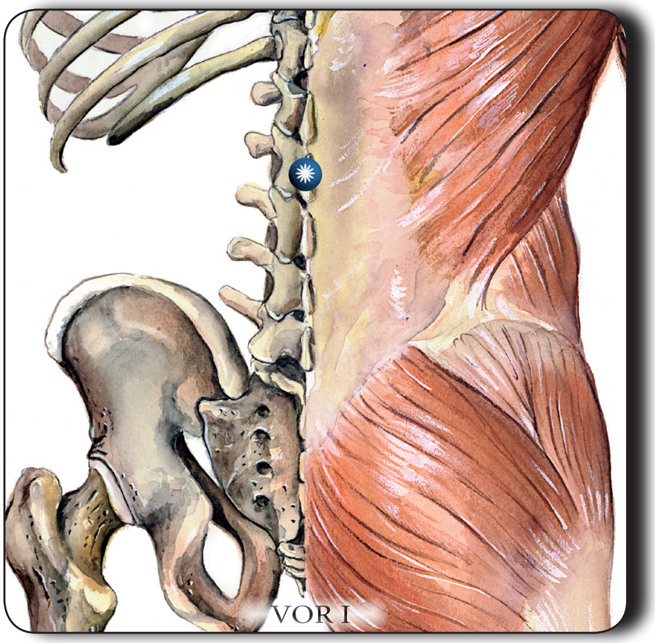
ADDUCTOR HALLUCIS, INFERIOR DIV.



NEUROVASCULAR



NEUROLYMPHATIC



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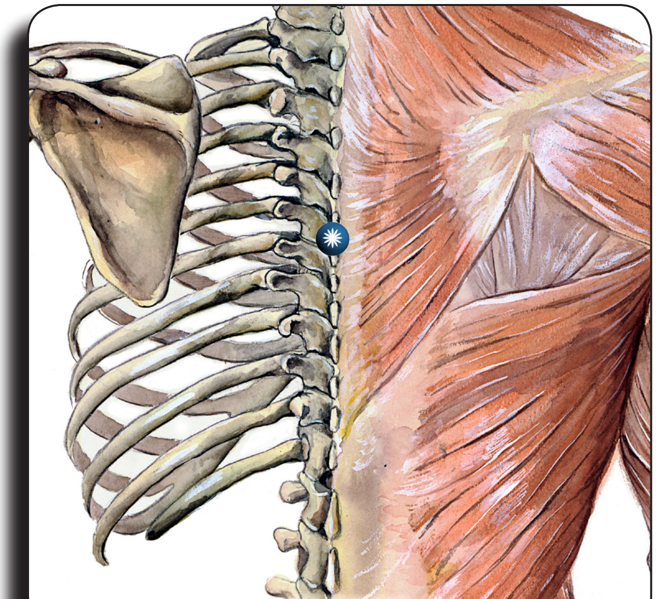

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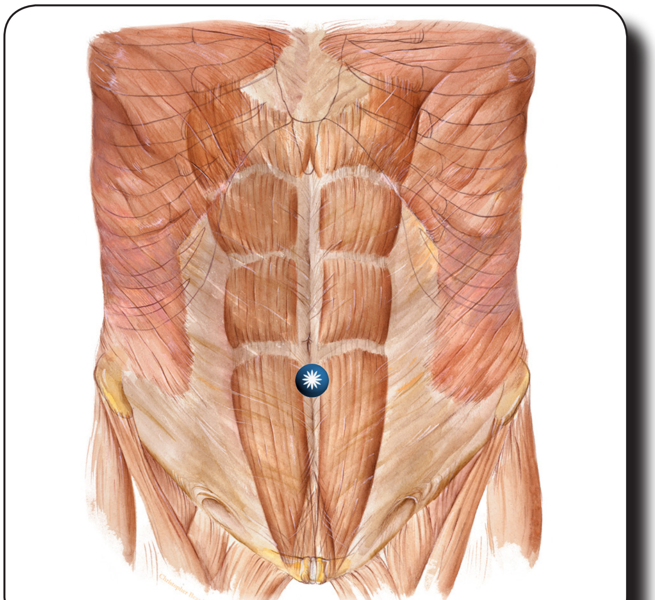


MUSCLE ACUPUNCTURE POINT

Muscle 924: FLEXOR HALLUCIS BREVIS, (First Cuneiform Division)

ORIGIN: First cuneiform.

INSERTION: Medial side of the proximal phalanx of the great toe.

ACTION: Flexes and everts the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position: Supine.
M.T.P.: Plantar flex proximal phalanx of great toe, keeping distal phalanx extended.
Doctor: Position: End of table facing patient.
Brace/Contact: Proximal phalanx of great toe with thumb and index fingers. Keep pressure on medial side of toe and turn toe clockwise.
Direction: Extend or dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Mandible, posterior side, just lateral to midline on origin of mylohyoideus.
NEUROLYMPHATIC: (Ant/L) First I.C.S. 1” from sternum.

VISCERAL ORGAN:

I. *Pineal:* (Post/Midline) Gv 4; between L2 and L3.

II. *Lymphatics of Stomach:* (Post/Midline) Gv 11; between sixth and seventh thoracic vertebrae.

M. A. P. : Cv 7

V.L. : T1 L

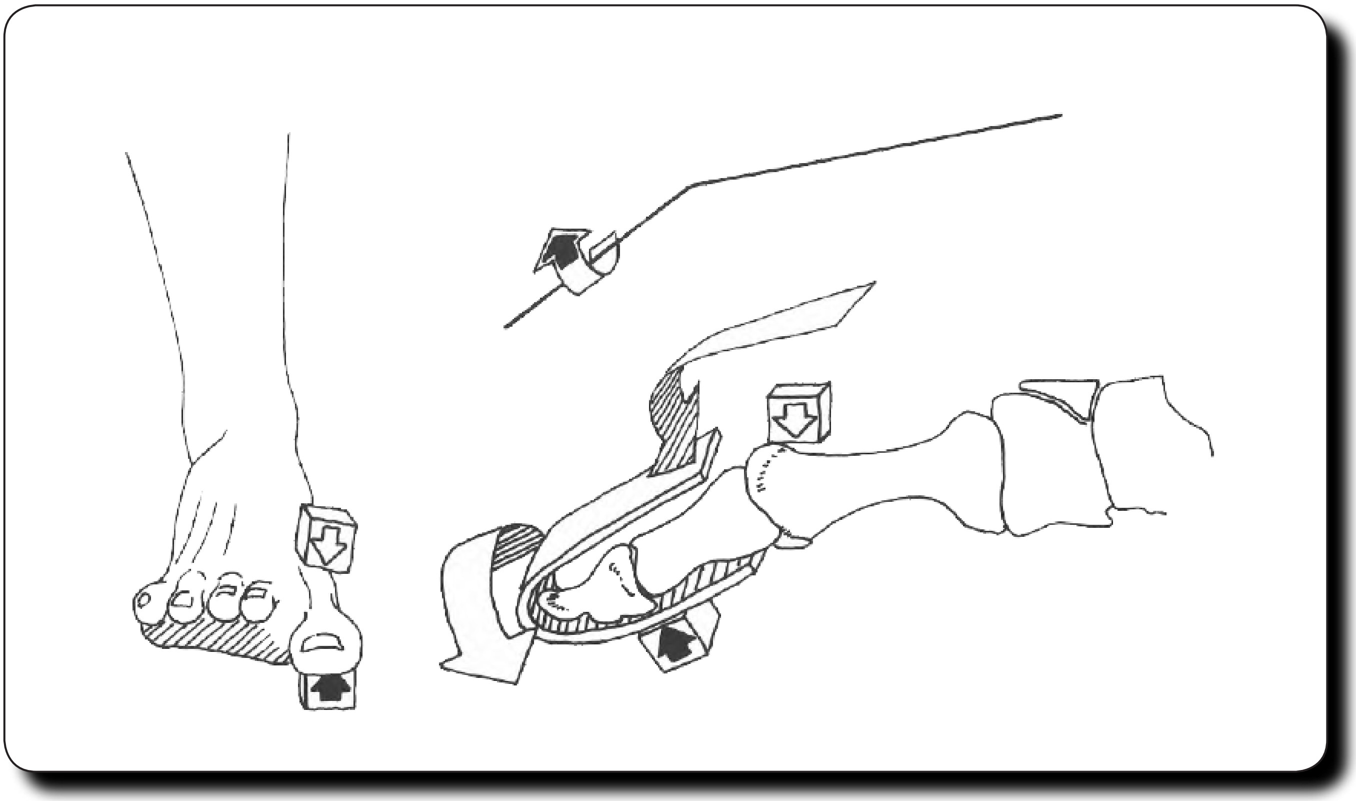
L. B. V.L. : T10 L

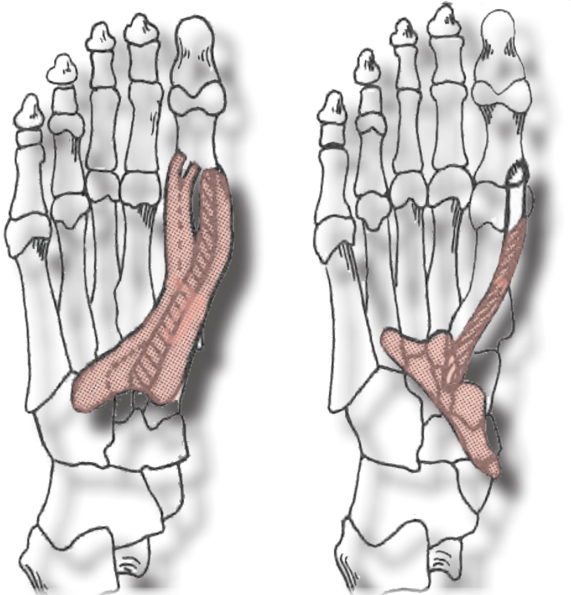
M. M. : S2

CRANIAL: Lacrimal

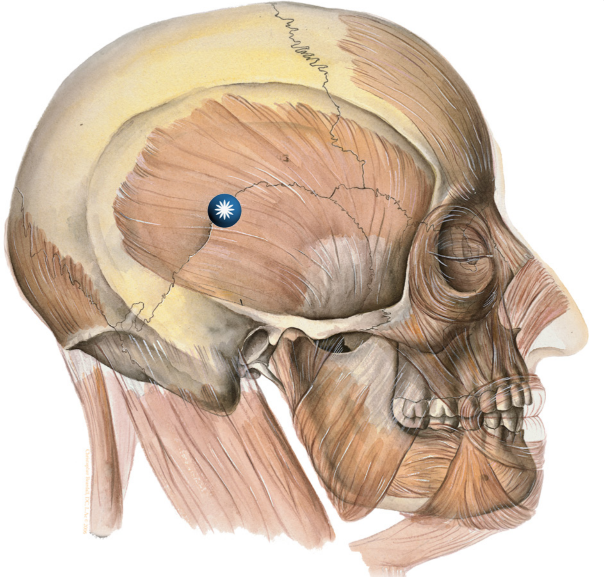
FOOT: Proximal Phalanx of Second Toe

NUTRIENT SOURCE: Vitamin B12
1. B12 (S)
2. Core B12 (N.W.)

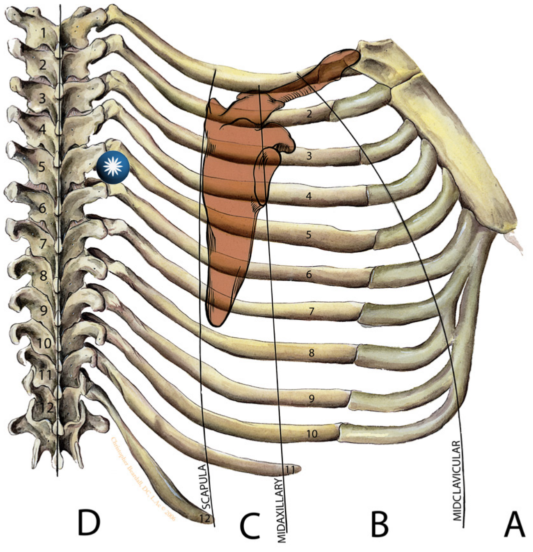




FLEXOR HALLUCIS BREVIS, FIRST CUNEIFORM DIV.



NEUROVASCULAR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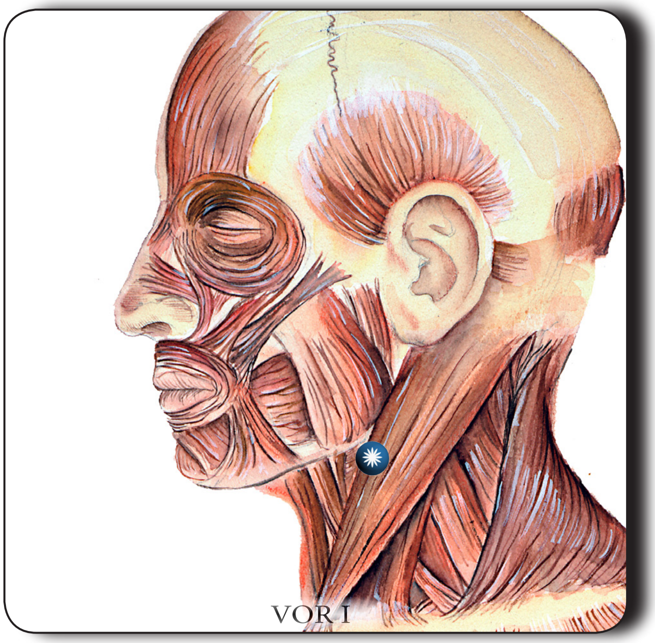
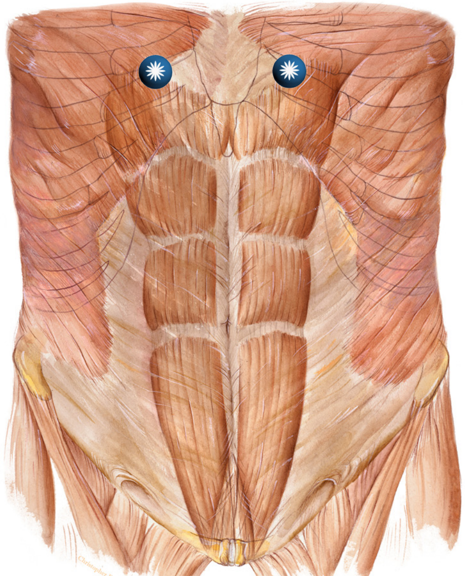
NEUROLYMPHATIC



VOR I



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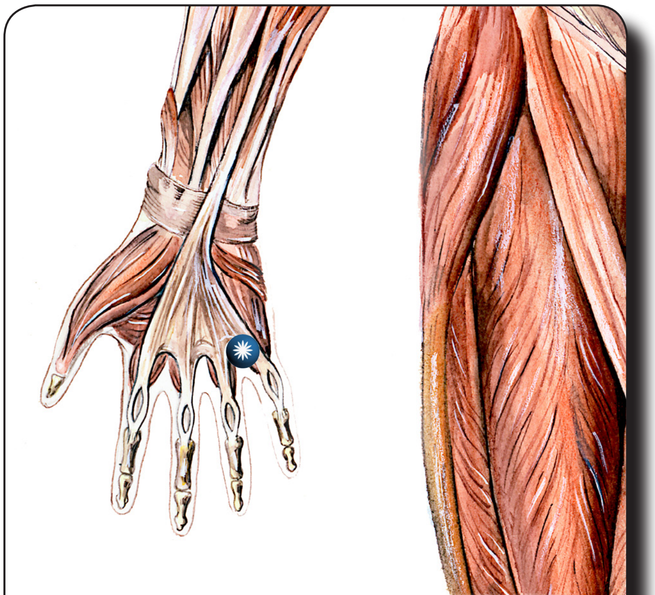


MUSCLE ACUPUNCTURE POINT

Muscle 926: FLEXOR HALLUCIS BREVIS, (Tendonal Division)

ORIGIN: Prolongation of the tendon of tibialis posterior.

INSERTION: Medial side of the proximal phalanx of the great toe.

ACTION: Flexes the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position: Supine
M.T.P.: Plantar flex proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace/Contact: Proximal phalanx of great toe with thumb and index finger. Keep pressure on medial side of toe and turn toe clockwise.
Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Squamosal suture of temporal bone, 3” superior to external auditory canal and 1” posterior.

NEUROLYMPHATIC: (Post/R) Fifth I.C.S. at the spine.

VISCERAL ORGAN:

I. *Tonsils:* (Ant/BL) Li 18 1/4; Sternocleidomastoideus, upper muscle belly.

II. *Pancreatic - Duct System:* (Ant/BL) Rectus abdominis, fourth section, at insertion of muscle on rib cage.

M. A. P. : H 8

V.L. : T8 R

L. B. V.L. : T3 R

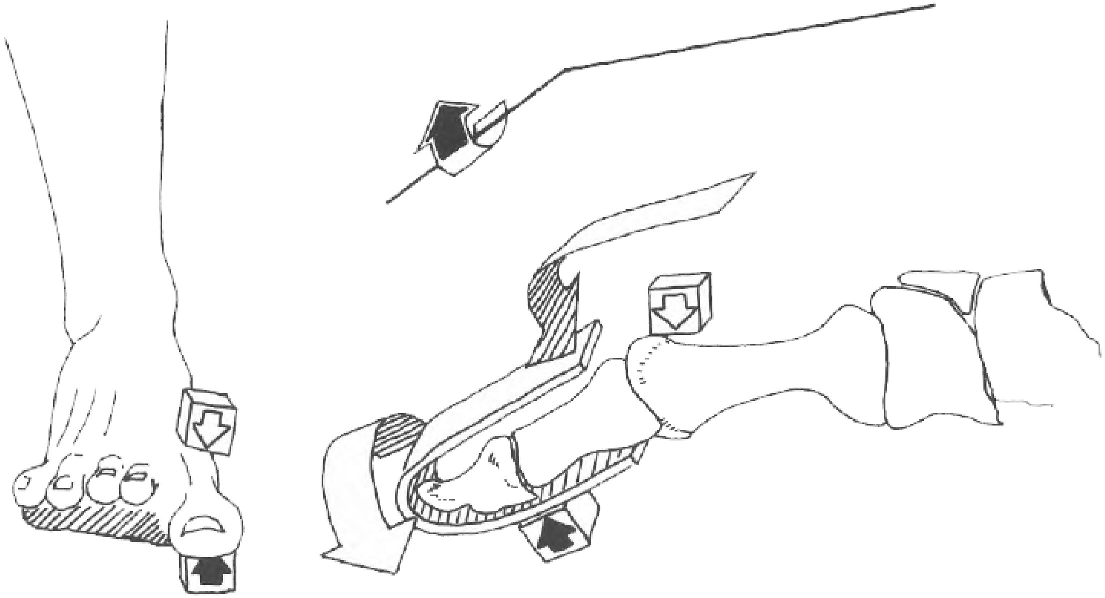
M. M. : S2

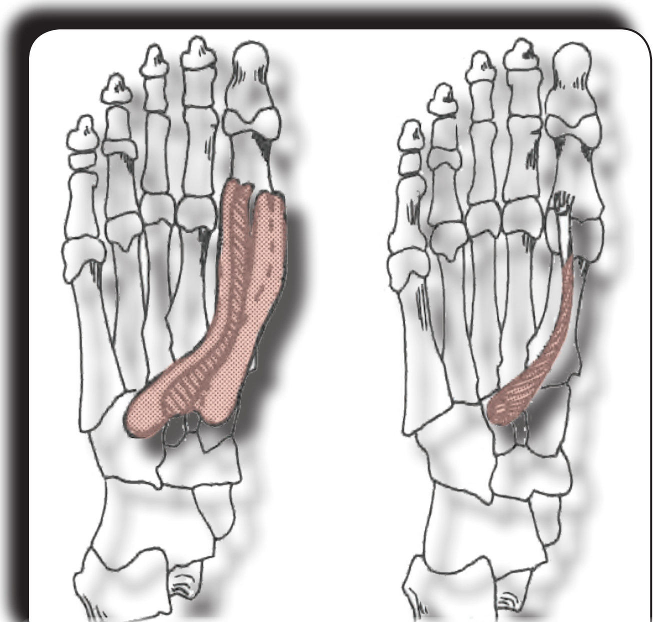
CRANIAL: Frontal

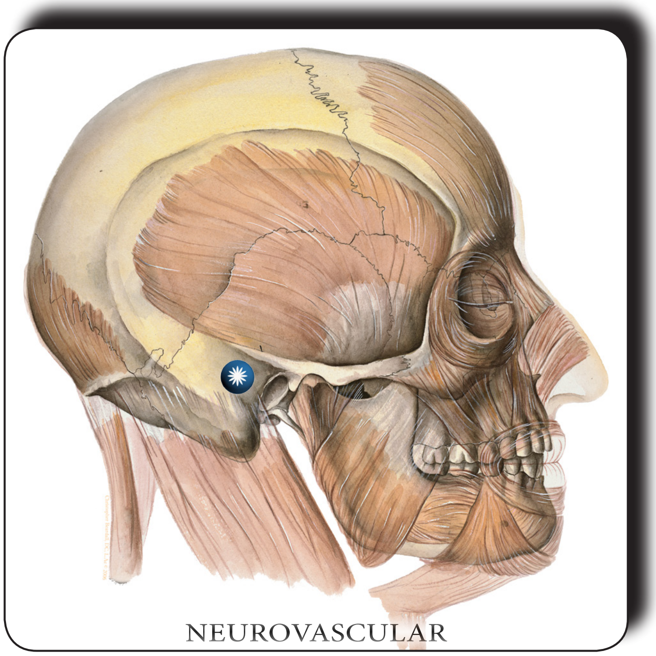
FOOT: Navicular

NUTRIENT SOURCE: Iodine

1. Iodomere (S)
2. Core Iodine (N.W.)




FLEXOR HALLUCIS BREVIS, 3rd CUNEIFORM DIV.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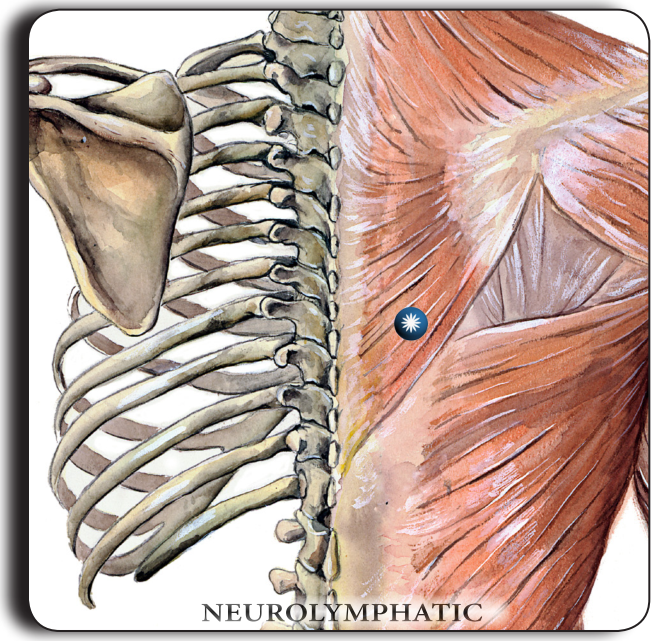
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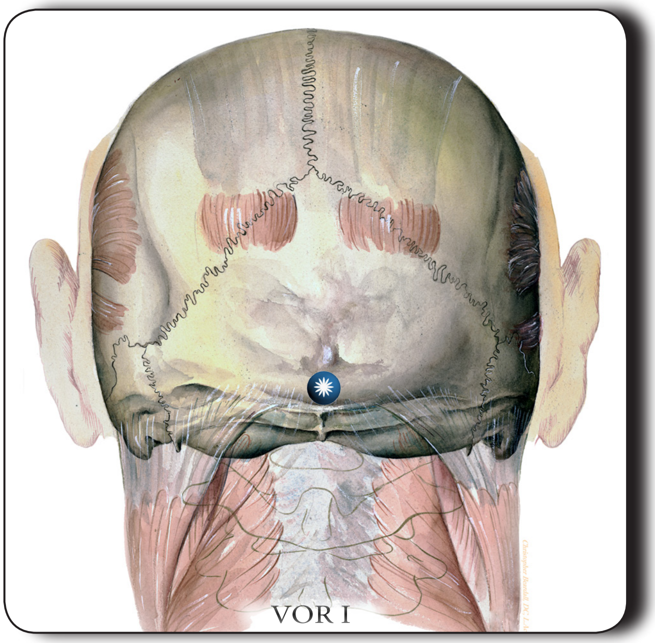
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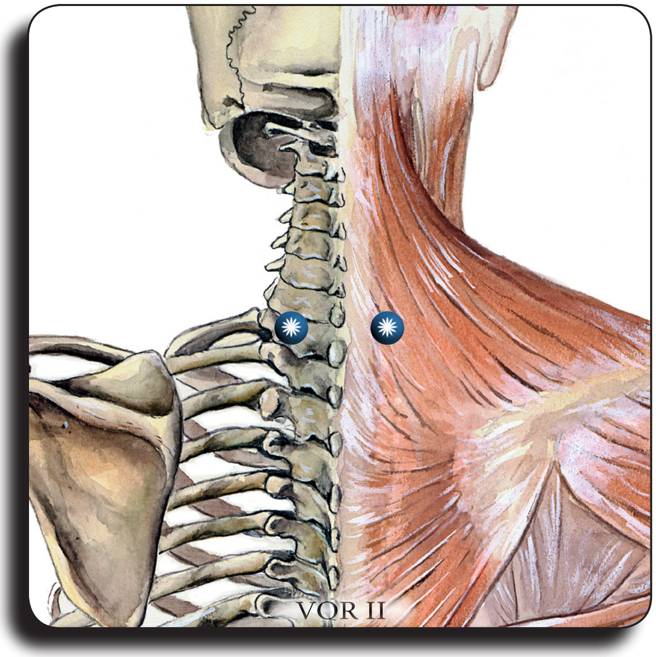
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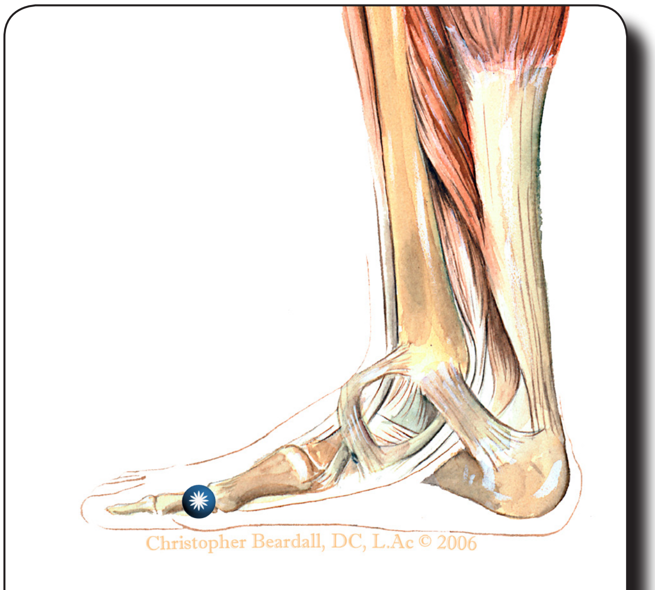

Christopher Beardall, DC, L.Ac © 2006

MUSCLE ACUPUNCTURE POINT

Muscle 928: FLEXOR HALLUCIS BREVIS, (Third Cuneiform Division)

ORIGIN: Contiguous portion of the third cuneiform.

INSERTION: Lateral side of the proximal phalanx of the great toe.

ACTION: Flexes the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position: Supine
M.T.P.: Plantar flex proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace/Contact: Proximal phalanx of great toe with thumb and index finger.
Maintainpressure on lateral side of toe, turn toe counter-clockwise.
Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Temporal bone, mastoid portion, directly posterior to external auditory canal.

NEUROLYMPHATIC: (Post/R) Eighth I.C.S., lateral to transverse processes.

VISCERAL ORGAN:

I. *Salivary Gland - Submandibular:* (Post/Midline) Occipital bone at base of external occipital protuberance
.

II. *Lungs:* (Post/BL) B 10.9, at level of transverse process of T1.

M. A. P. : Sp 2.5

V.L. : L3 L

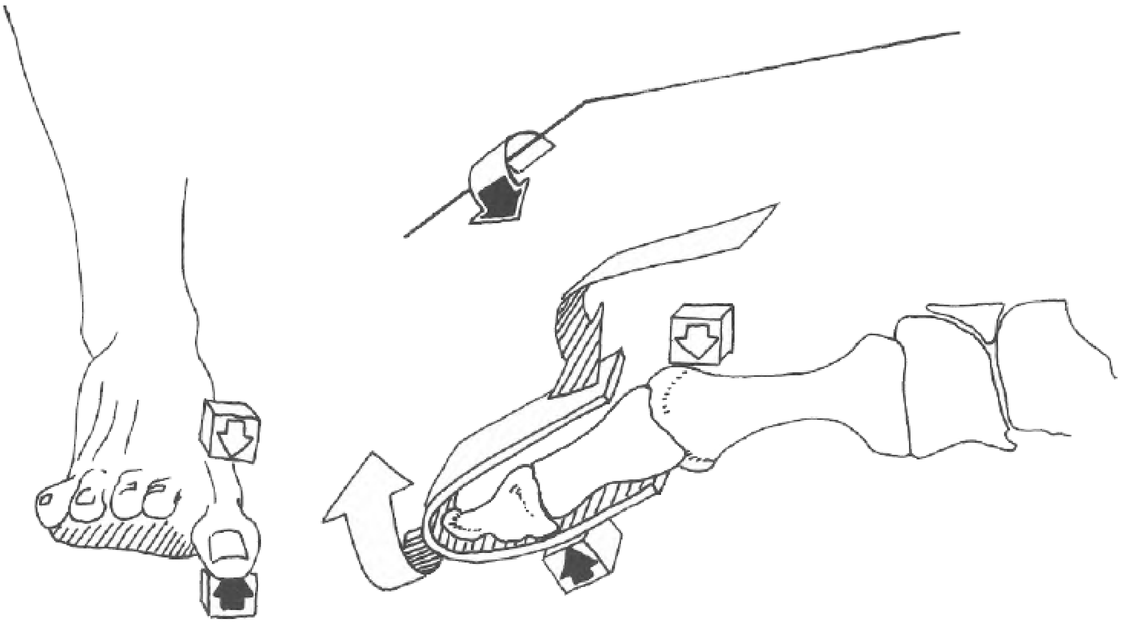
L. B. V.L. : C3 L

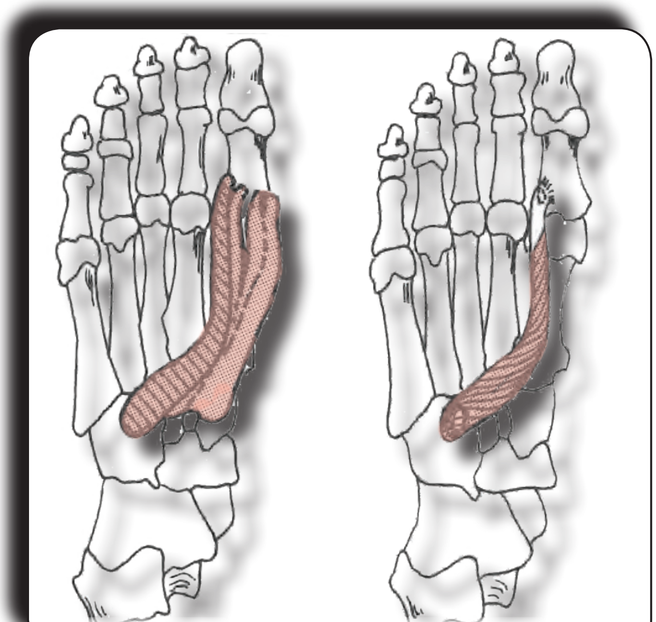
M. M. : S2

CRANIAL: Maxillae

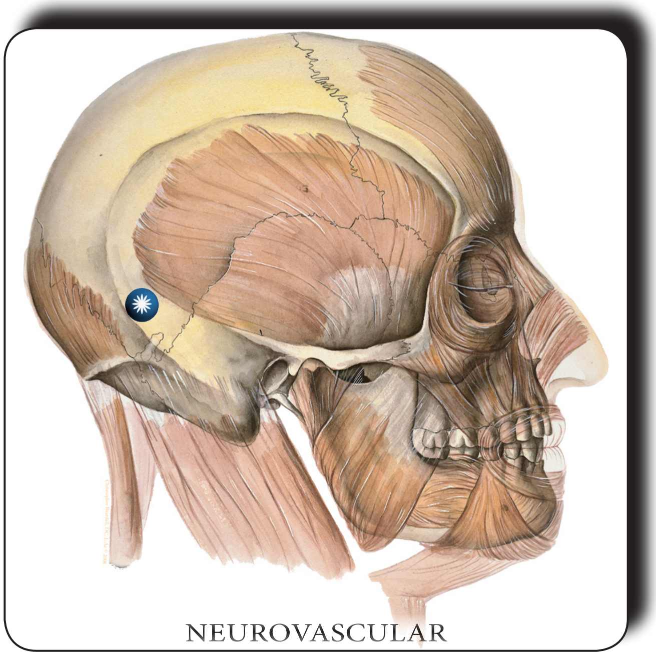
FOOT: Third Cuneiform

NUTRIENT SOURCE: In Research





FLEXOR HALLUCIS BREVIS, CUBOID DIV.



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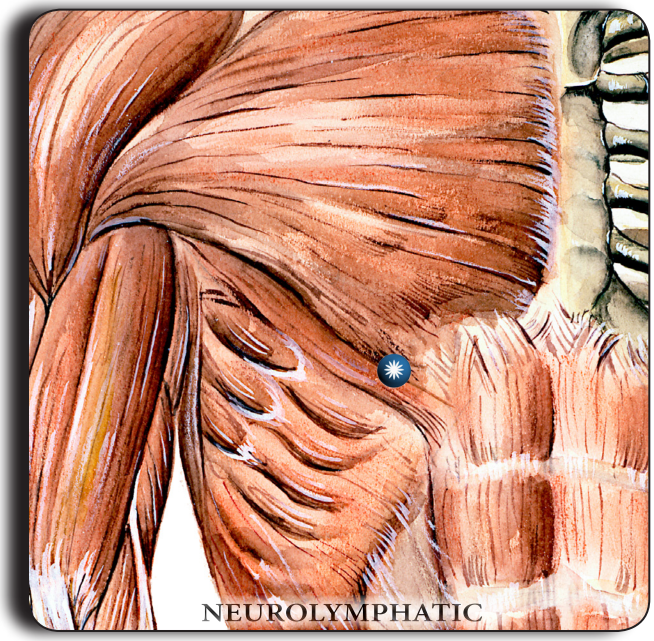

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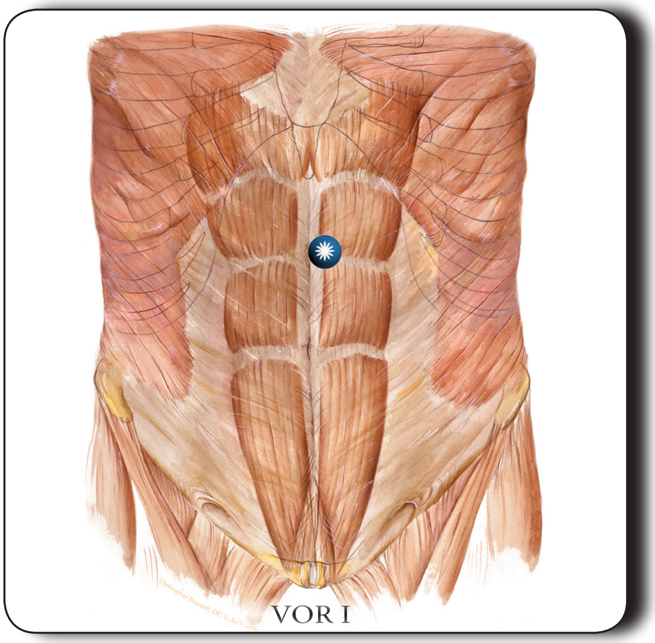
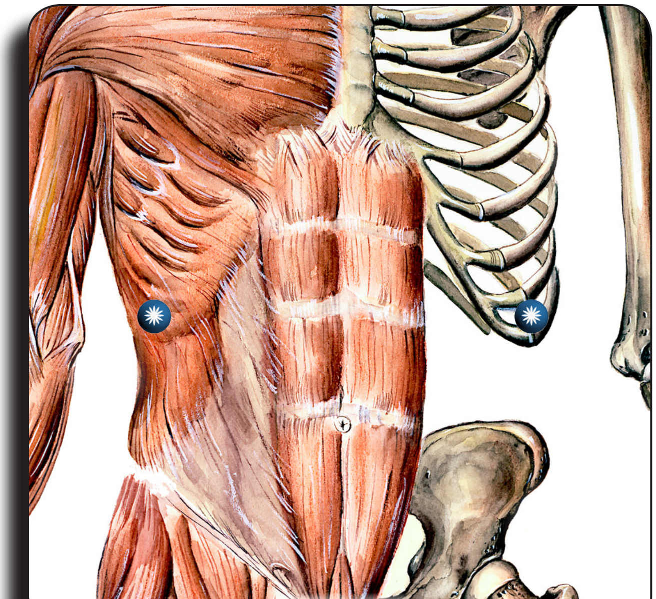


VOR I



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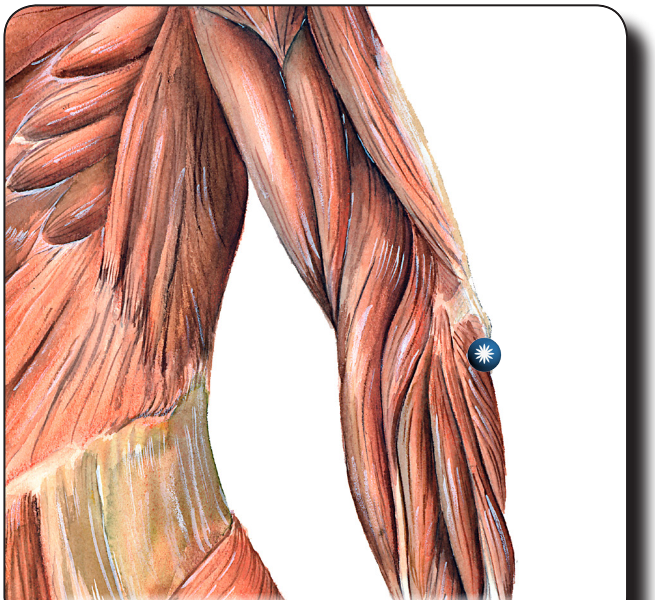


MUSCLE ACUPUNCTURE POINT

Muscle 930: FLEXOR HALLUCIS BREVIS, (Cuboid Division)

ORIGIN: Medial plantar surface of cuboid and third cuneiform.

INSERTION: Medial and lateral sides of the base of the proximal phalanx of the great toe.

ACTION: Flexes the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position Supine.
M.T.P.: Plantar flex proximal phalanx of great toe while keeping distal phalanx extended.
Doctor: Position: End of table facing patient.
Brace/Contact : Proximal phalanx of great toe with thumb and index finger. Maintain pressure on lateral side of toe, turn toe counter-clockwise.
Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, near asterion.
NEUROLYMPHATIC: (Ant/R) Sixth I.C.S., costal cartilage junction.

VISCERAL ORGAN:

I. *Jejunum - 7th Section:* (Ant/L) Rectus abdominis, third section, near origin.

II. *Lungs:* (Ant/BL) Ninth rib, 1"from costal cartilage junction.

M. A. P. : T 9 3/4

V.L. : L5 L

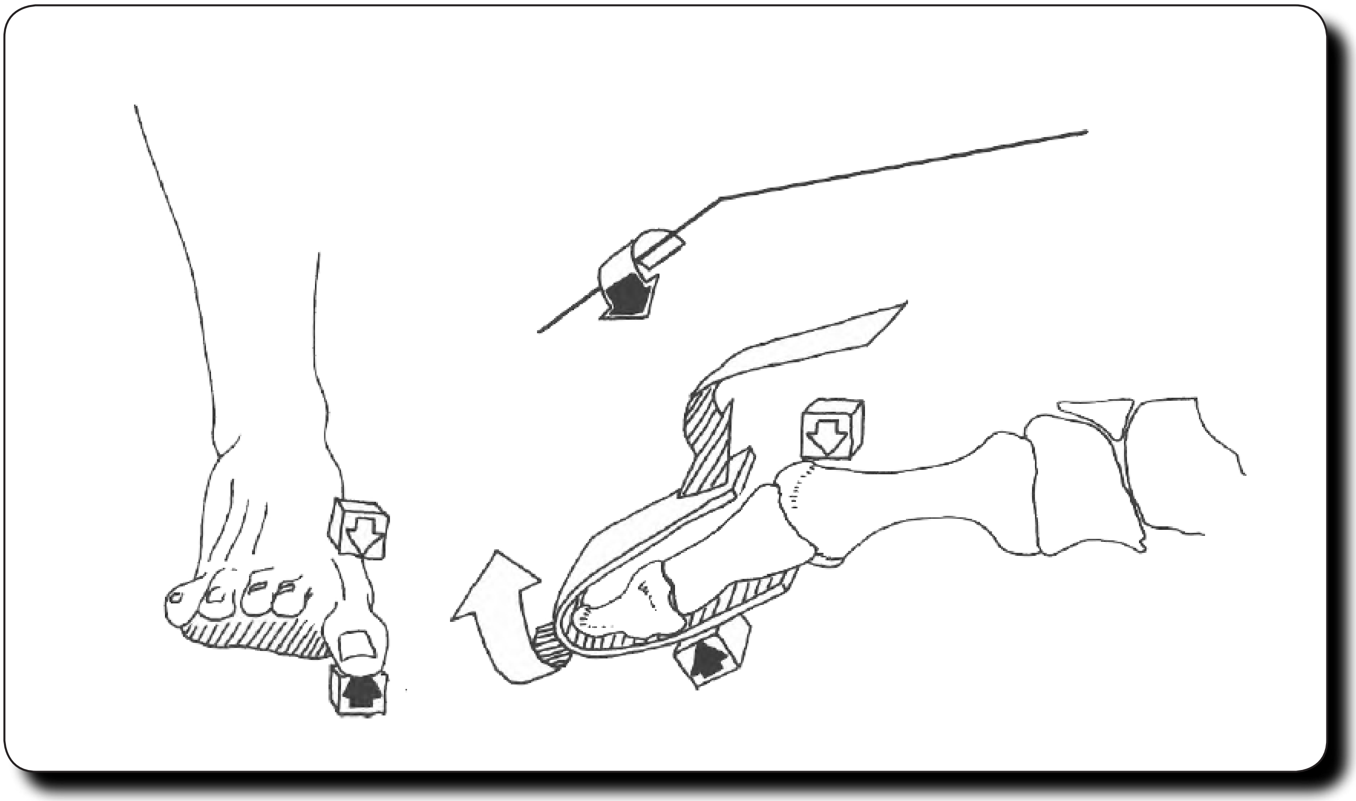
L. B. V.L. : C1 L

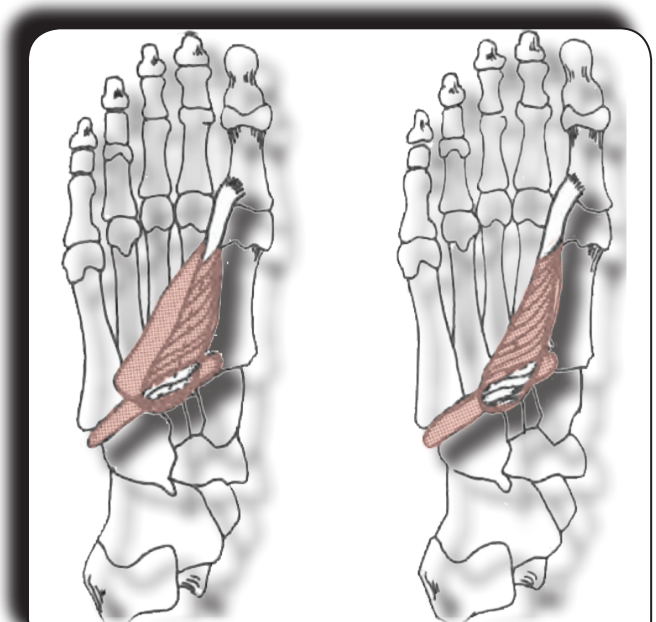
M. M. : S2

CRANIAL: Palatine

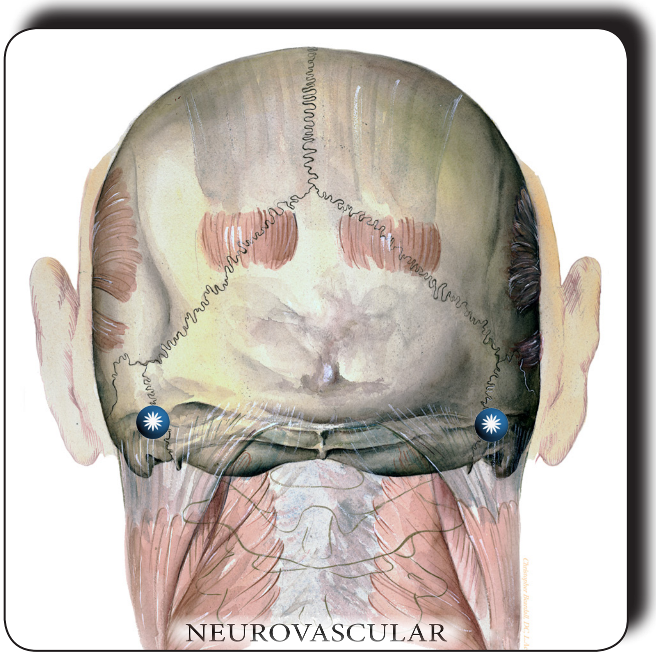
FOOT: First Metatarsal

NUTRIENT SOURCE: Potassium
1. Organic Minerals (S)
2. Core Potassium (N.W.)
3. Aspartic K (N.W.)





ABDUCTOR HALLUCIS OBLIQUE HEAD, PERONEUS DIV.



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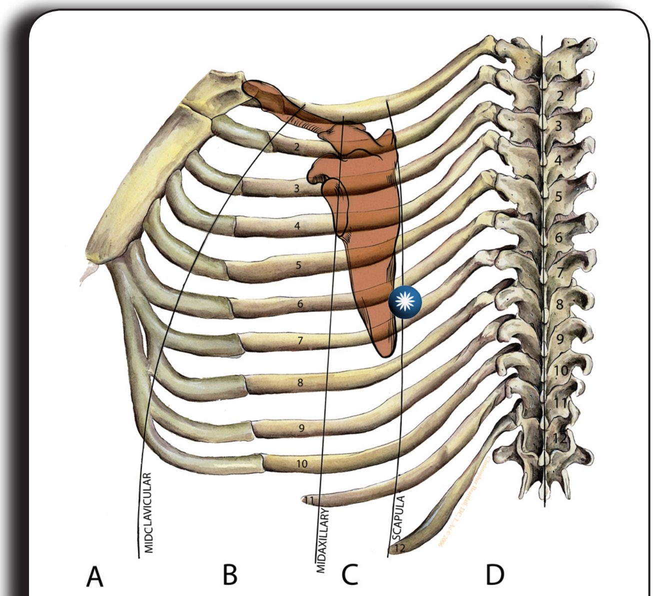
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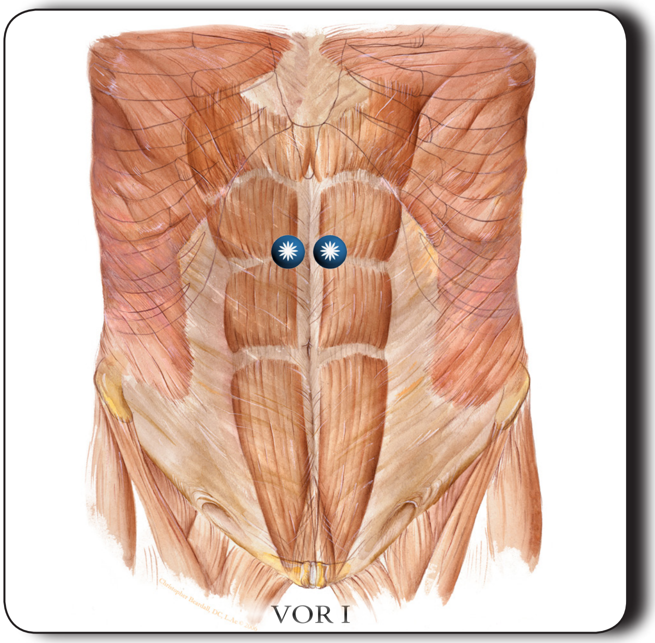

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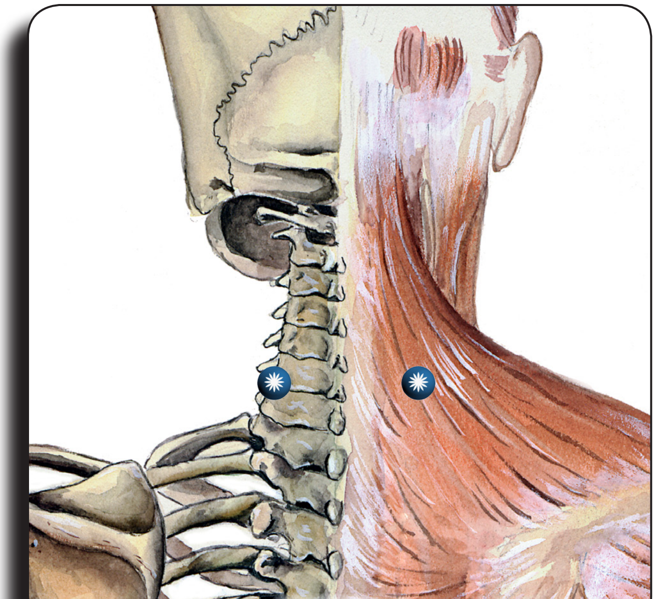
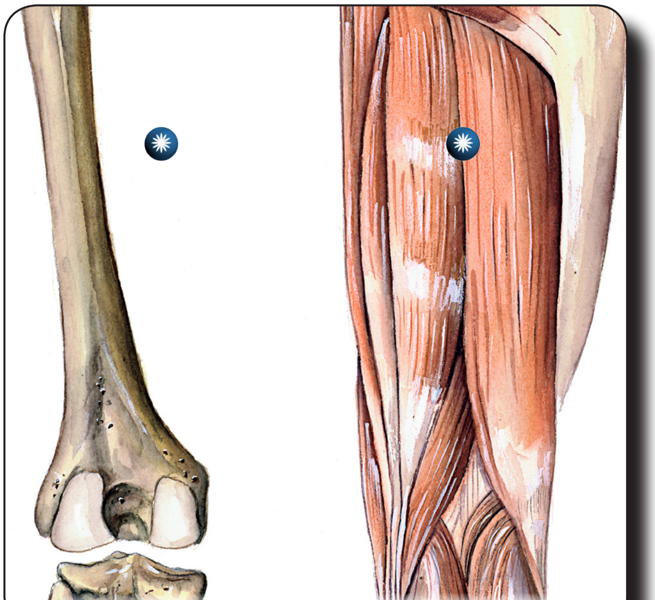


VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 932: ABDUCTOR HALLUCIS OBLIQUE HEAD (Adductor Hallucis Oblique Head, Peroneus Division)

ORIGIN: Sheath of the tendon of peroneus longus.

INSERTION: Medial proximal surface of proximal phalanx of the great toe.

ACTION: Abducts and assists in plantar flexion of proximal phalanx of great toe. Maintains concavity of distal aspect of longitudinal arch.

TEST:

Patient: Position: Supine.
M.T.P.: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace: First metatarsal on medial aspect.
Contact: Distal phalanx of great toe.
Direction: Adduct great toe.

NEUROVASCULAR: (Post/BL) Occipitomastoid suture, below level of external auditory canal.

NEUROLYMPHATIC: (Post/L) Sixth I.C.S., 6" lateral to spine.

VISCERAL ORGAN:

I. *Stomach:* (Ant/BL) Rectus abdominis, between second and third section, medial side.

II. *Palatine Adenoids:* (Post/BL)Bladder meridian at level of C6.

M. A. P. : B 50 1/2

V.L. : T10 R

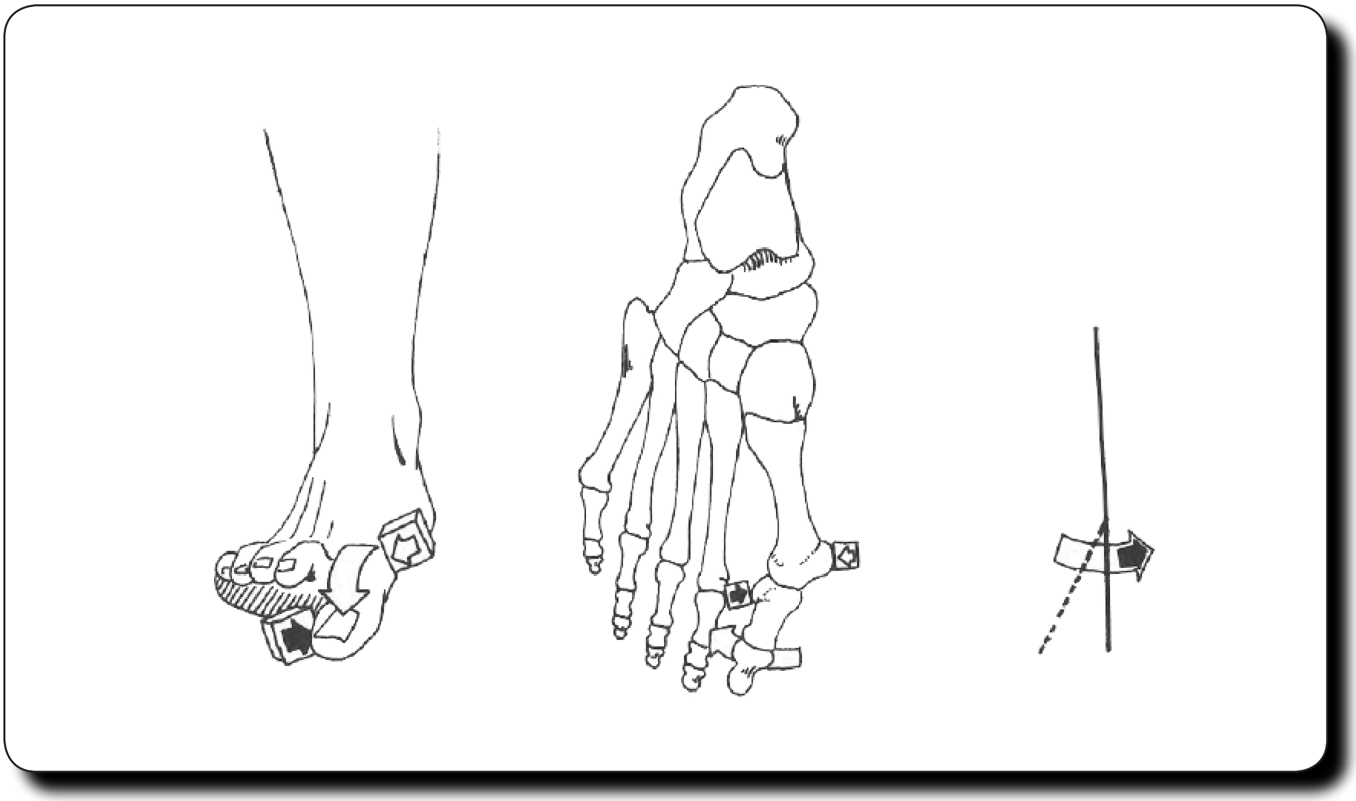
L. B. V.L. : T1 R

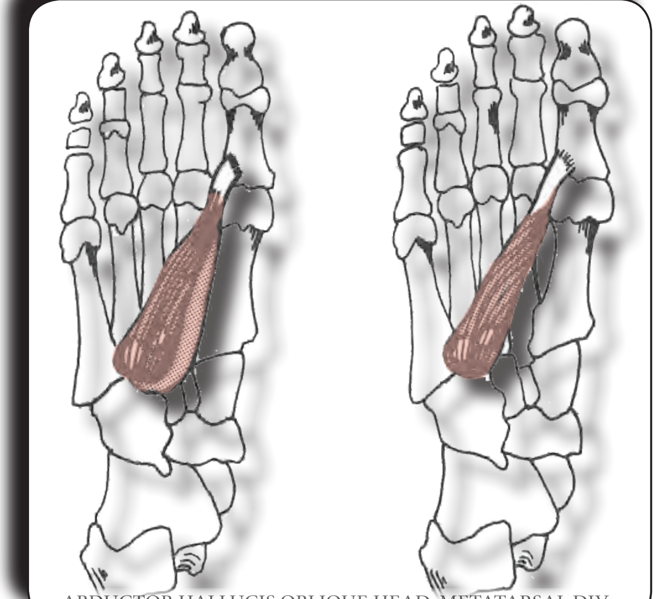
M. M. : S3

CRANIAL: In Research

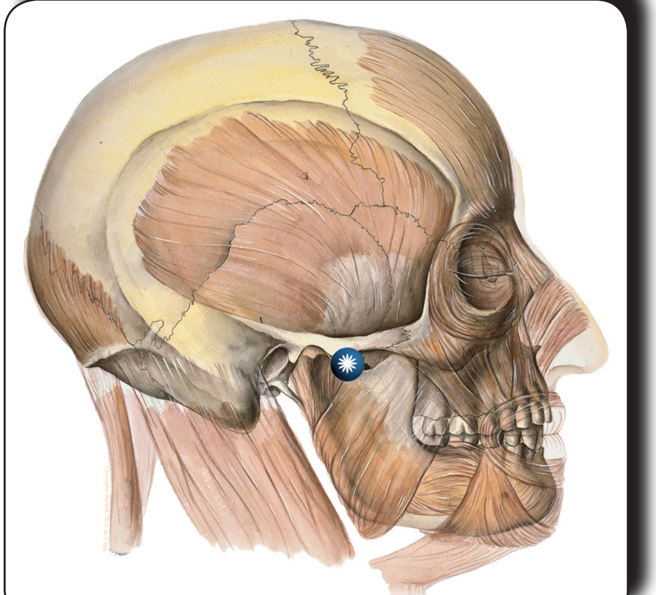
FOOT: In Research

NUTRIENT SOURCE: Iodine
1. Organic Iodine (S)
2. Core Iodine (N.W.)





ABDUCTOR HALLUCIS OBLIQUE HEAD, METATARSAL DIV.



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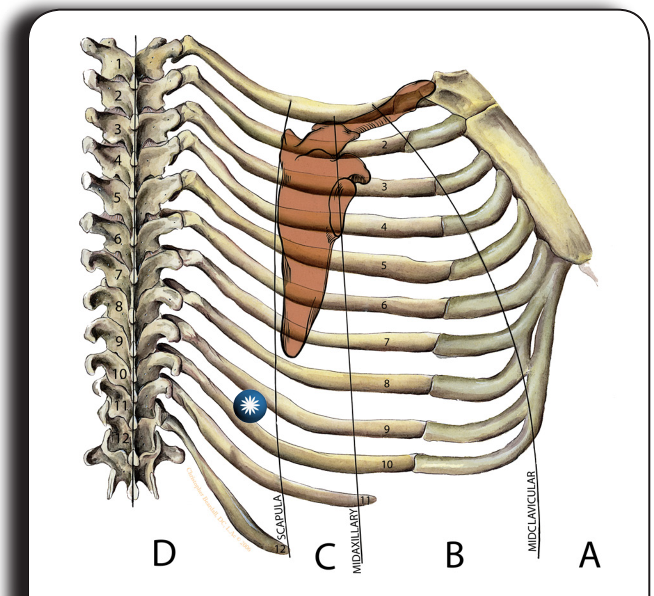
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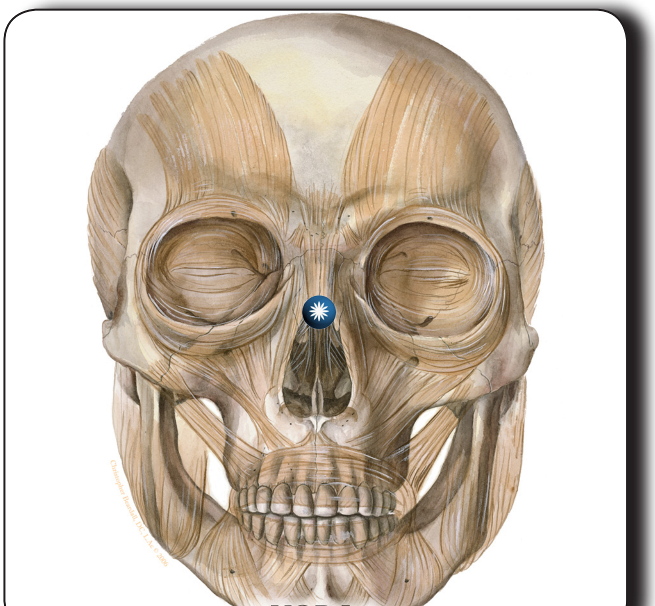
NEUROLYMPHATIC



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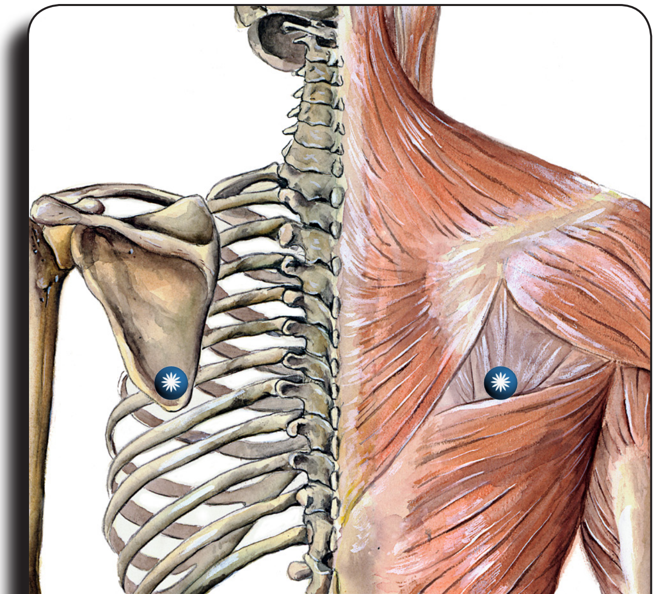

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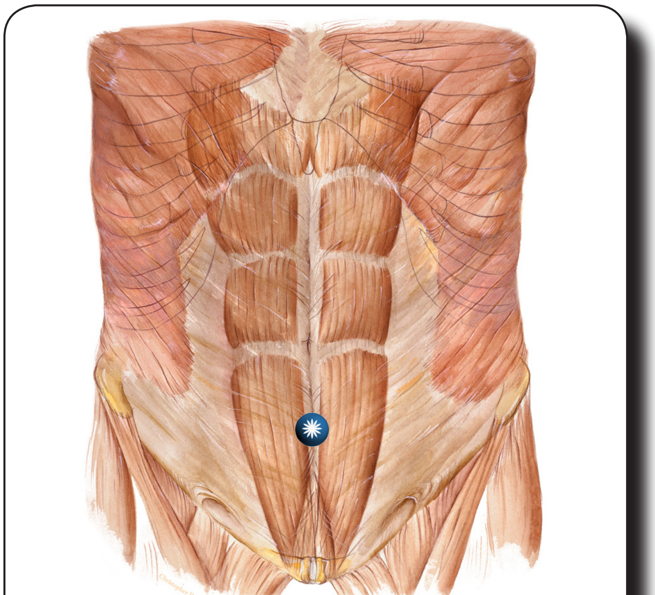


MUSCLE ACUPUNCTURE POINT

Muscle 934: ABDUCTOR HALLUCIS OBLIQUE HEAD
(Adductor Hallucis Oblique Head, Metatarsal Division)

ORIGIN: Base of second, third, and fourth metatarsals.

INSERTION: Lateral side of the base of the proximal phalanx of the great toe.

ACTION: Abducts and assists in plantar flexion of proximal phalanx of great toe. Maintains concavity of distal aspect of longitudinal arch.

TEST:

Patient: Position: Supine.
M.T.P.: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace: First metatarsal on medial aspect.
Contact: Distal phalanx of great toe.
Direction: Adduct great toe.

NEUROVASCULAR: (Lat) Mandible, between coronoid process and condyle.
NEUROLYMPHATIC: (Post/R) Ninth I.C.S., 2" lateral to spine.

VISCERAL ORGAN:

I. *Nose:* (Ant/Midline) Gv 24.7; tip of nasal suture

.

II. *Lungs:* (Post/BL) Tip of scapula.

M. A. P. : Cv 5

V.L. : C4 R

L. B. V.L. : L2 R

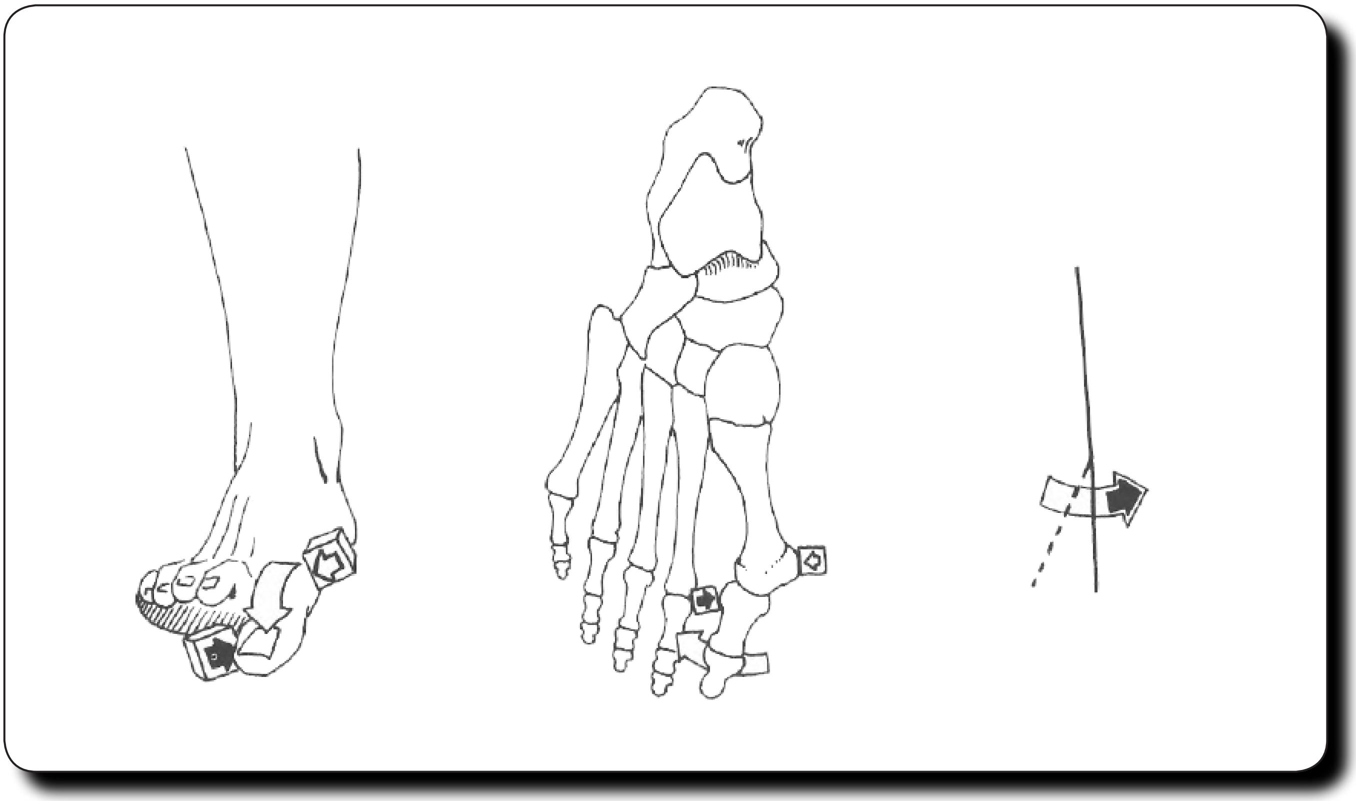
M. M. : S3

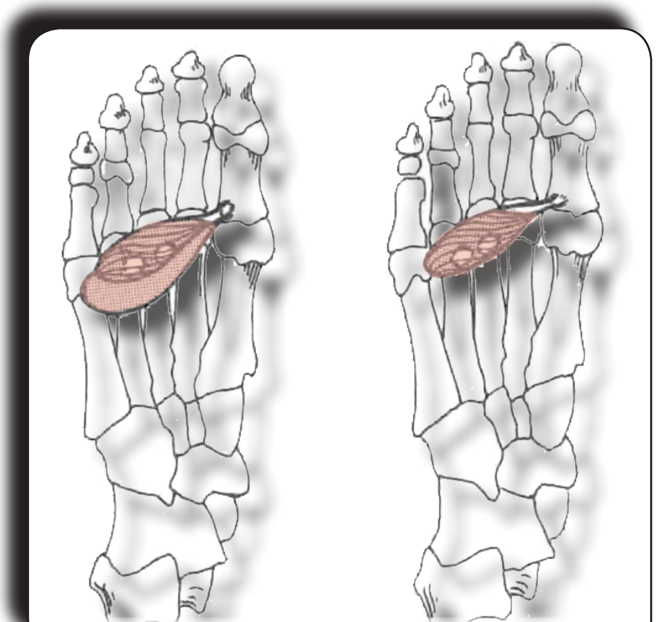
CRANIAL: Occipital

FOOT: Calcaneus

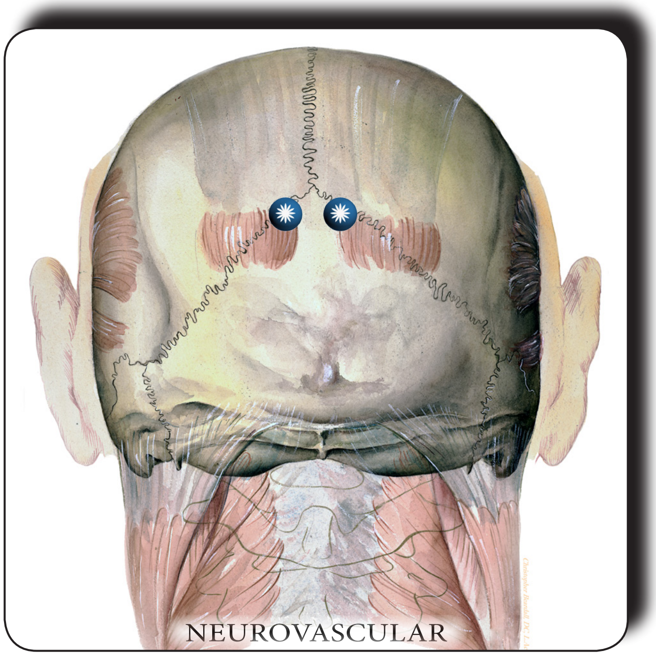
NUTRIENT SOURCE: Biotin

1. G Complex (S)
2. Core Biotin (N.W.)





ABDUCTOR HALLUCIS TRANSVERSE HEAD, MEDIAL DIV.



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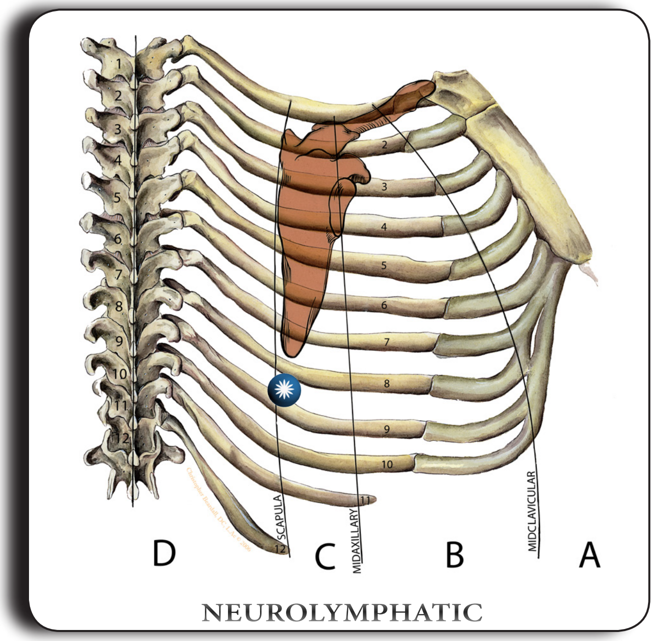
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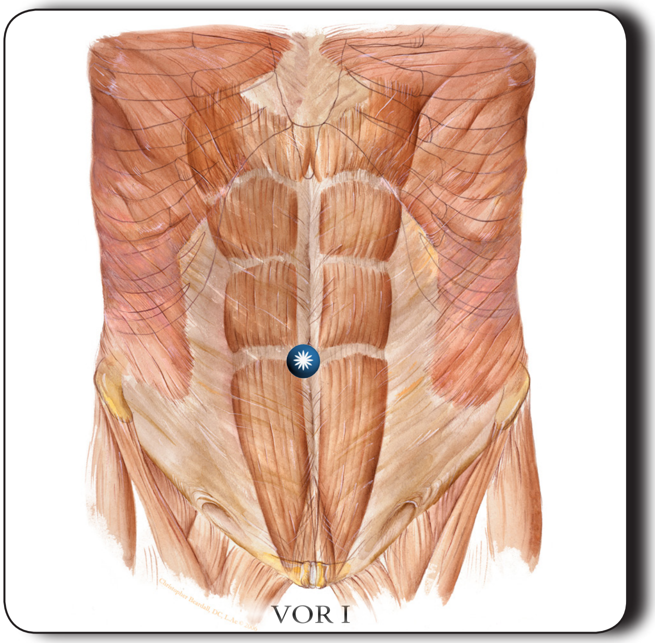
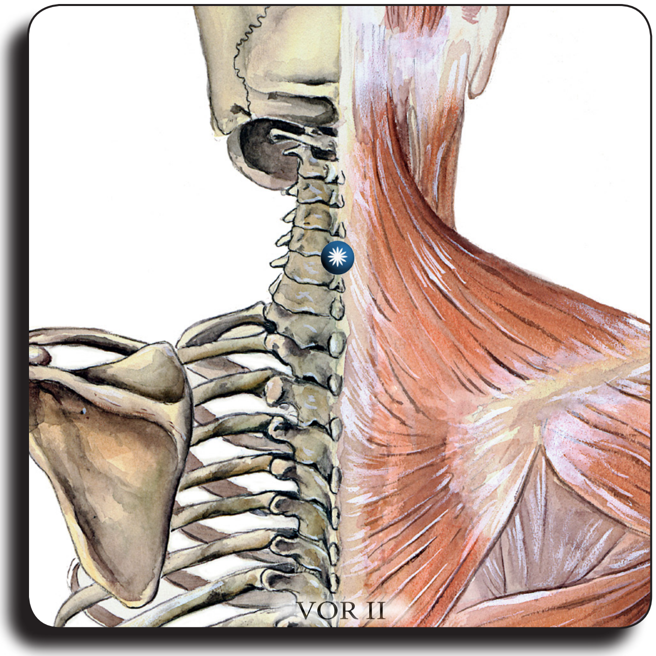
NEUROLYMPHATIC



VOR I



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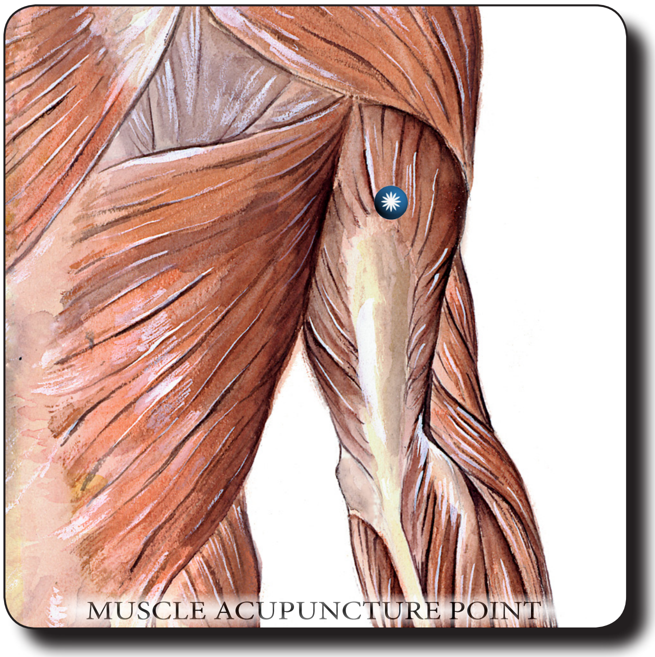


MUSCLE ACUPUNCTURE POINT

Muscle 936: ABDUCTOR HALLUCIS TRANSVERSE HEAD (Adductor Hallucis Transverse Head, Medial Division)

ORIGIN: Plantar metatarsophalangeal ligaments of the third and fourth toes.

INSERTION: Lateral side of the base of the proximal phalanx of the great toe.

ACTION: Abducts and flexes the proximal phalanx of the great toe. Helps maintain concavity of transverse arch of foot

TEST:

Patient: Position: Supine.
M.T.P.: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace: Plantar and dorsal surfaces of foot with thumb and index finger.
Contact: Distal aspect of fourth and fifth metatarsals and great toe.
Direction: Separate fourth metatarsal and great toe.

NEUROVASCULAR: (Post/BL) Occiput, just below posterior fontanelle.

NEUROLYMPHATIC: (Post/R) Eighth I.C.S., at vertebral border of scapula.

VISCERAL ORGAN:

I. *Ileum:* (Ant/R) 7 o'clock on umbilicus.

II. *Testicle/Ovaries:* (Post/Midline) Gv 14.3; between C5 and C6.

M. A. P. : T 12 1/4

V.L. : T9 L

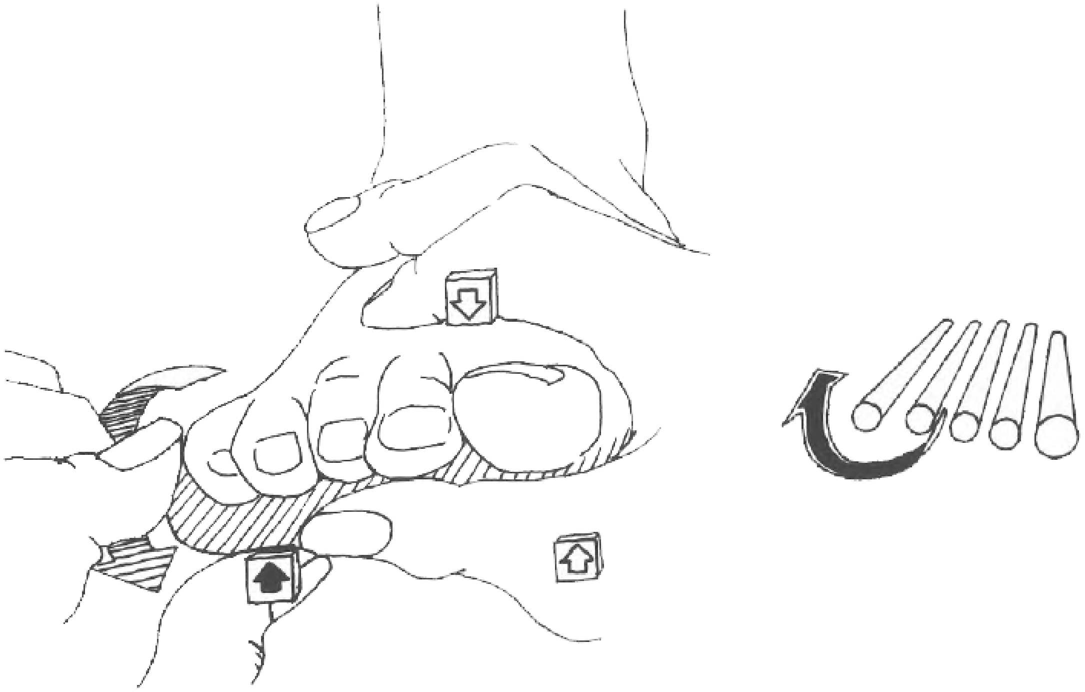
L. B. V.L. : T2 L

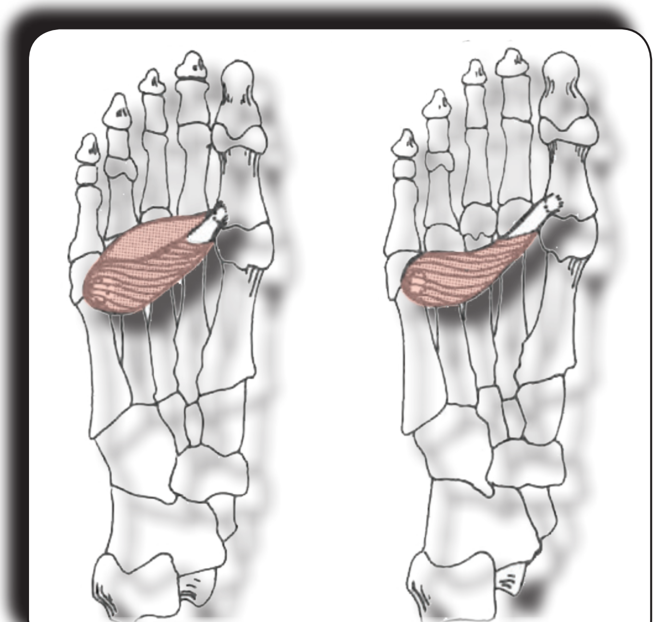
M. M. : S2

CRANIAL: T.M.J.

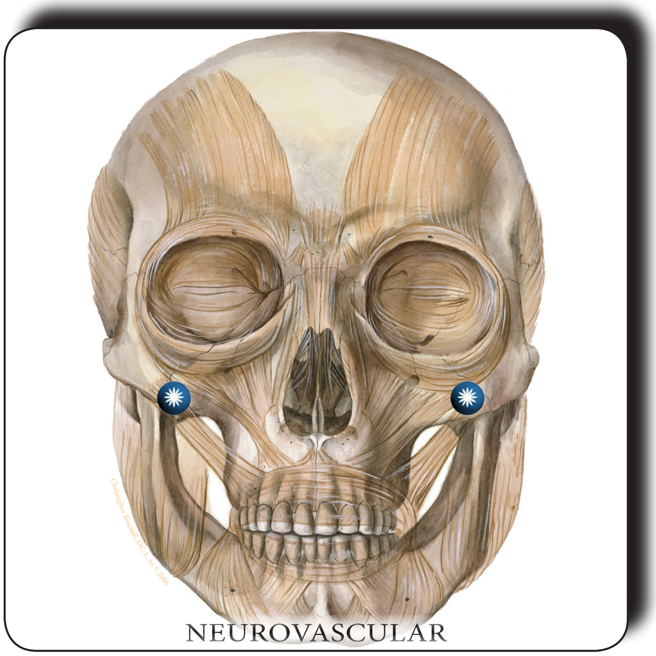
FOOT: Proximal Phalanx of Great Toe.

NUTRIENT SOURCE: Rutin
1. Cyruta (S)
2. Core Rutin (N.W.)





ABDUCTOR HALLUCIS TRANSVERSE HEAD, LATERAL DIV.



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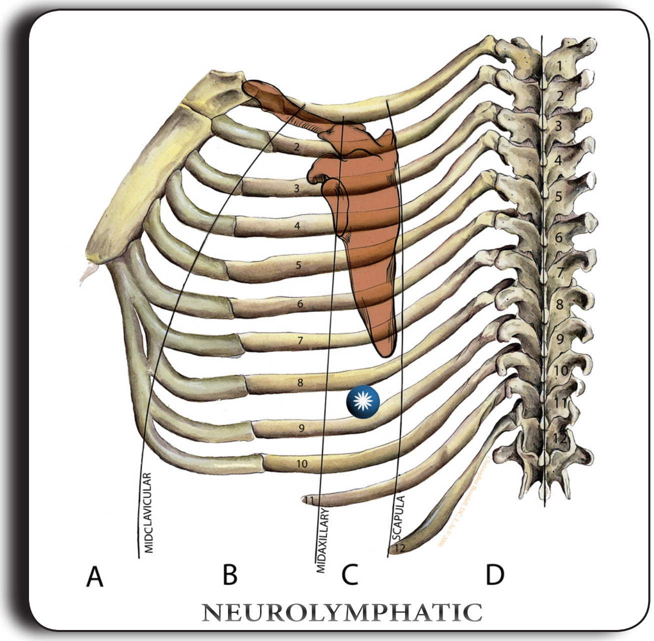
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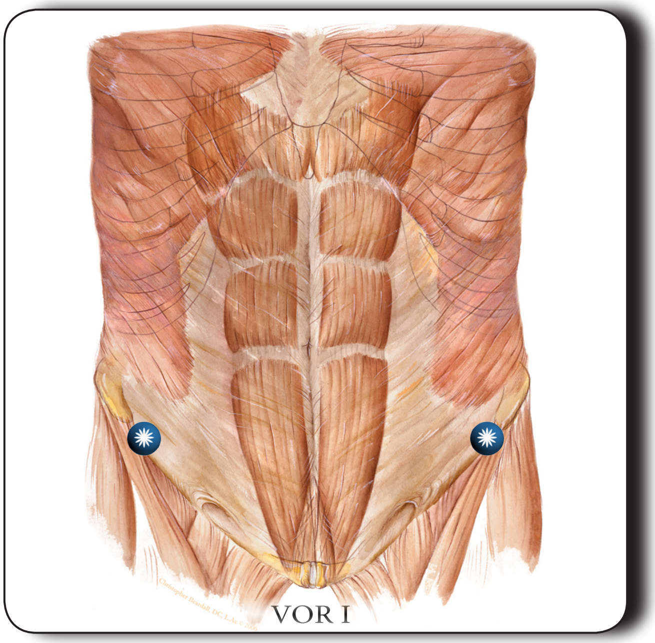
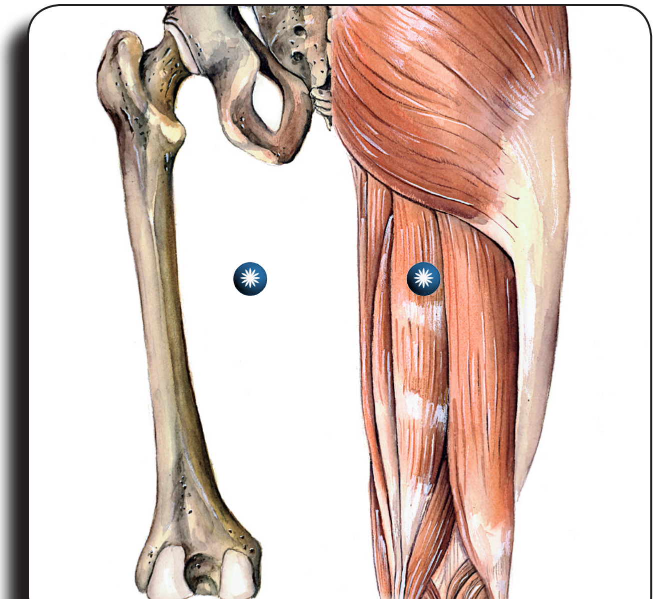
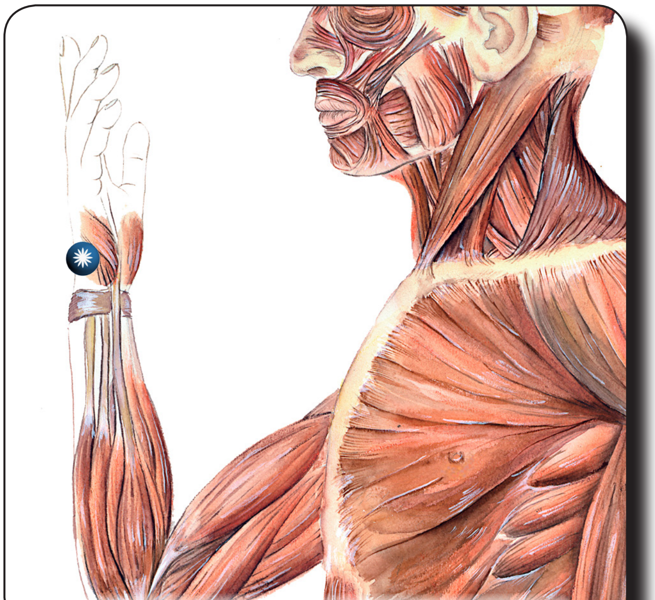
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 938: ABDUCTOR HALLUCIS TRANSVERSE HEAD, (Adductor Hallucis Transverse Head, Lateral Division)

ORIGIN: Plantar metatarsalsophalangeal ligaments, expecially fourth and fifth toes.

INSERTION: Lateral side at the base of the proximal phalanx of great toe.

ACTION: Abducts and flexes the proximal phalanx of the great toe. Helps maintain concavity of the transverse arch of the foot.

TEST:

Patient: Position: Supine.
M.T.P.: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace: Plantar and dorsal surfaces of foot with thumb and index finger.
Contact: Distal aspect of fifth metatarsal and great toe.
Direction: Separate fifth metatarsal and great toe.

NEUROVASCULAR: (Ant/BL) Maxillary bone, below zygoma, level with inferior part of nose.

NEUROLYMPHATIC: (Post/L) Eighth I.C.S., parascapular.

VISCERAL ORGAN:

I. *Lymphatics of Jejunum:* (Ant/BL) Abdominal inguinal ligament, just medial to origin of sartorius.

II. *Colon - Rectal Area:* (Post/BL) Posterior aspect of thigh, 3” inferior to B 50, 1” medial to midline.

M. A. P. : Si 4

V.L. : T12 L

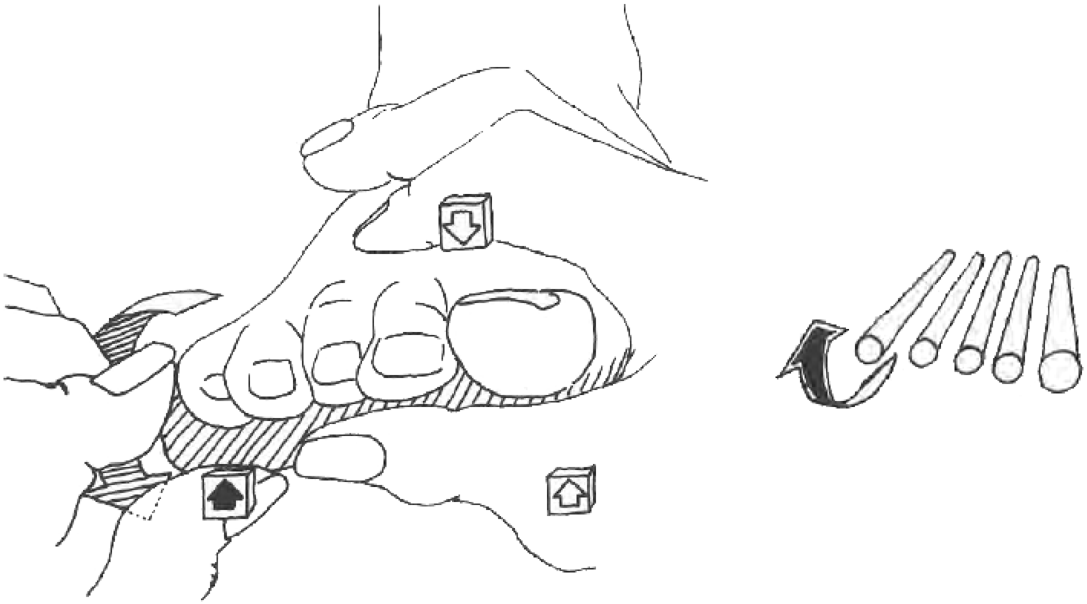
L. B. V.L. : C6 L

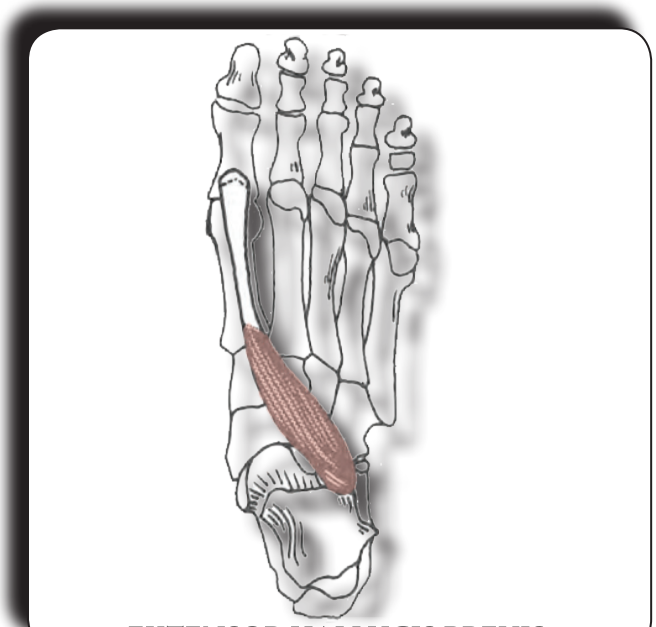
M. M. : S3

CRANIAL: Mandible

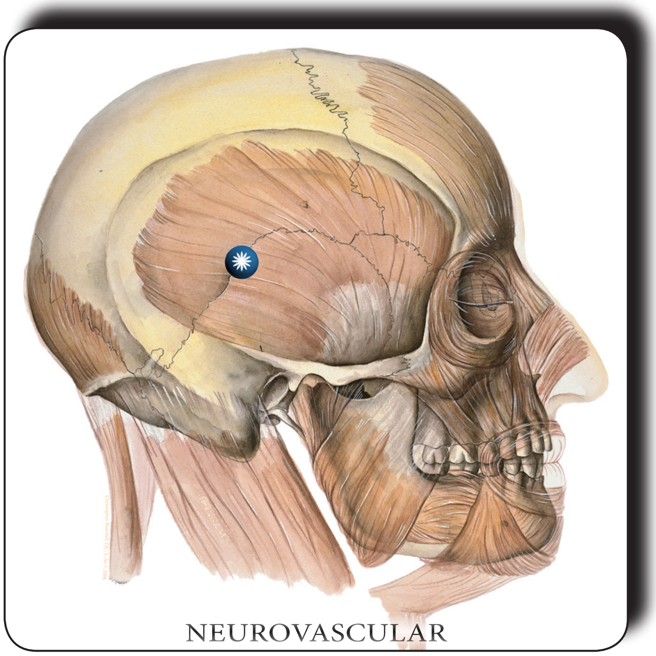
FOOT: First Phalanx of Great Toe

NUTRIENT SOURCE: Vitamin B2
1.G Complex (S)
2.Core Riboflavin (N.W.)

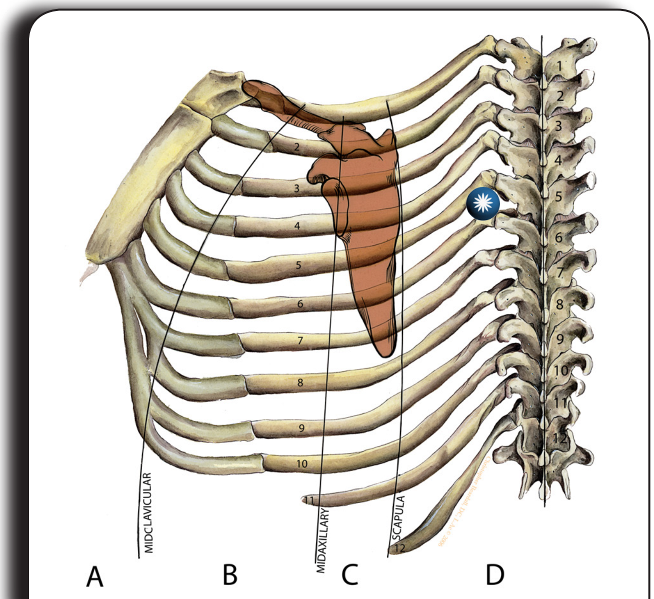




EXTENSOR HALLUCIS BREVIS



NEUROVASCULAR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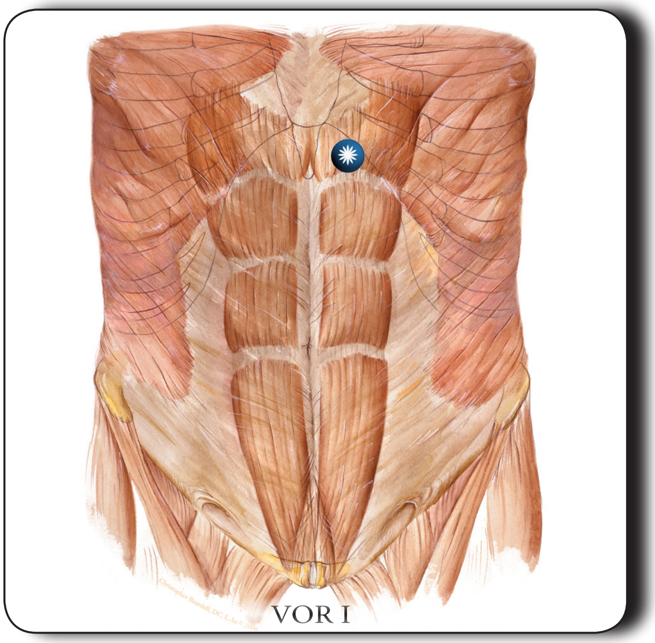
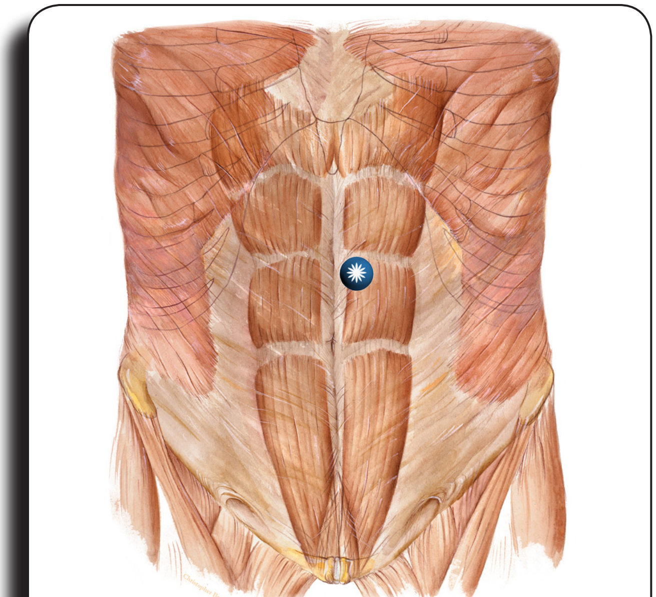
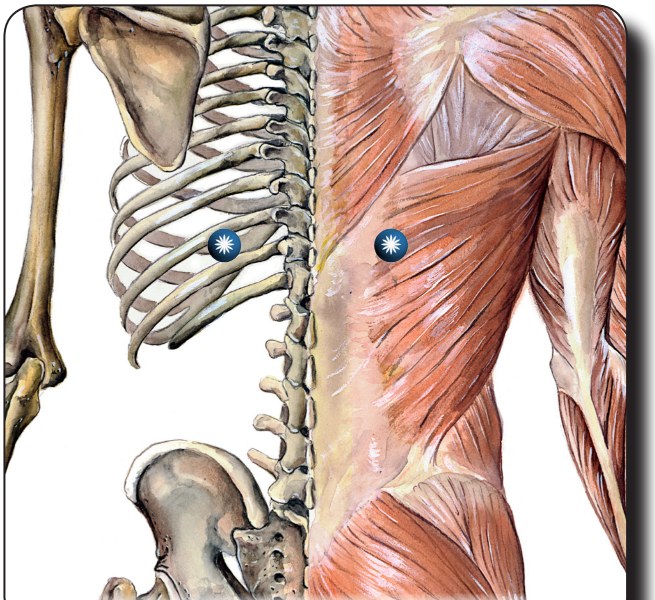
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 940: EXTENSOR HALLUCIS BREVIS

ORIGIN:
1. Lateral talocalcaneal ligament.
2. Stem of the inferior extensor retinaculum.

INSERTION: Base of proximal phalanx of great toe.

ACTION: Dorsiflexes the proximal phalanx of the great toe.

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex proximal phalanx of great toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and plantar surfaces of great toe.
Contact: Proximal phalanx of great toe.
Direction: Plantar flex great toe through mid-sagittal plane.

NEUROVASCULAR: (Lat) Squamosal suture, 2" superior and 1' posterior to external auditory canal.

NEUROLYMPHATIC: (Post/L) Fifth I.C.S., at its transverse process.

VISCERAL ORGAN:

I. *Pancreatic - Duct System:* (Ant/L) Rectus abdominis, fourth section, just lateral to K 21.

II. *Jejunum:* (Ant/L) Rectus abdominis, second section, near insertion level or K 18.

M. A. P. : B 43

V.L. : T9 L

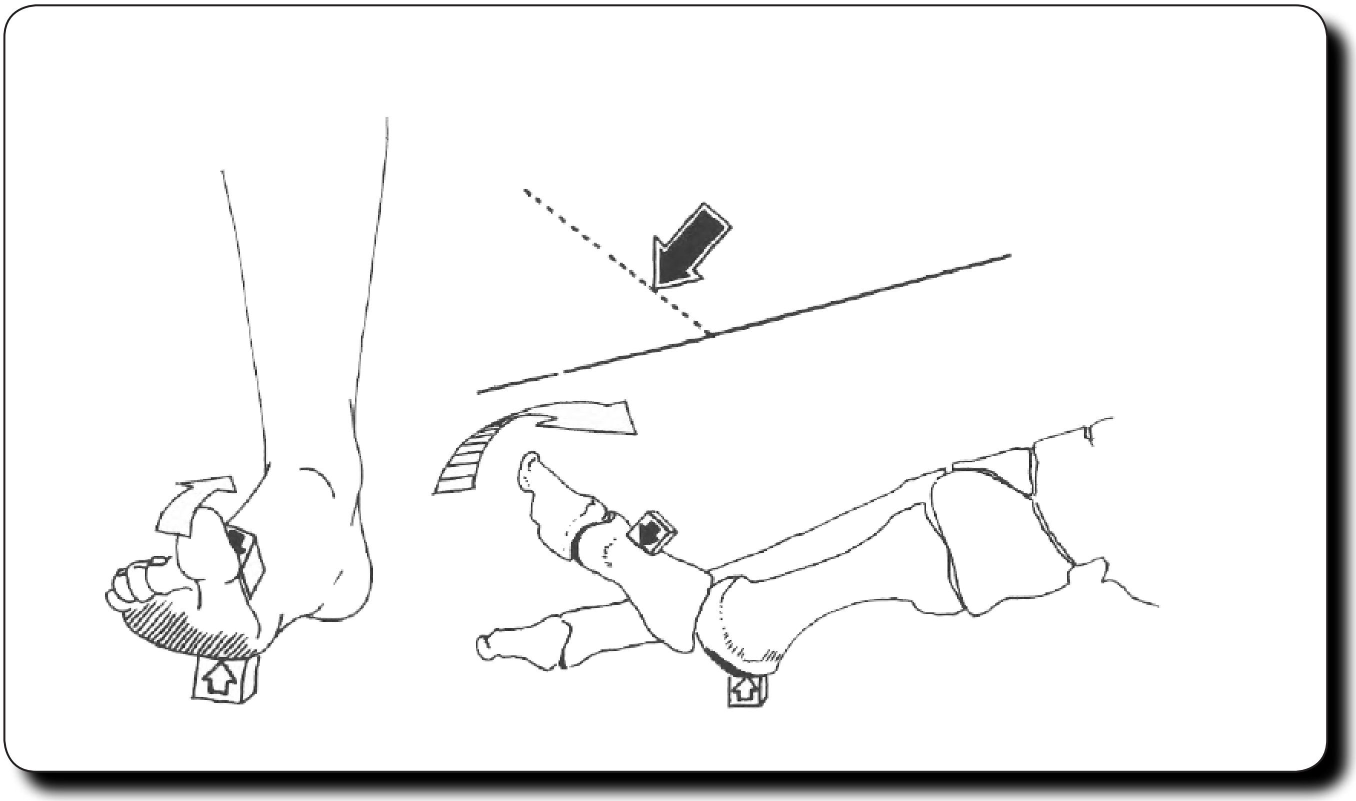
L. B. V.L. : T2 L

M. M. : S2

CRANIAL: In Research

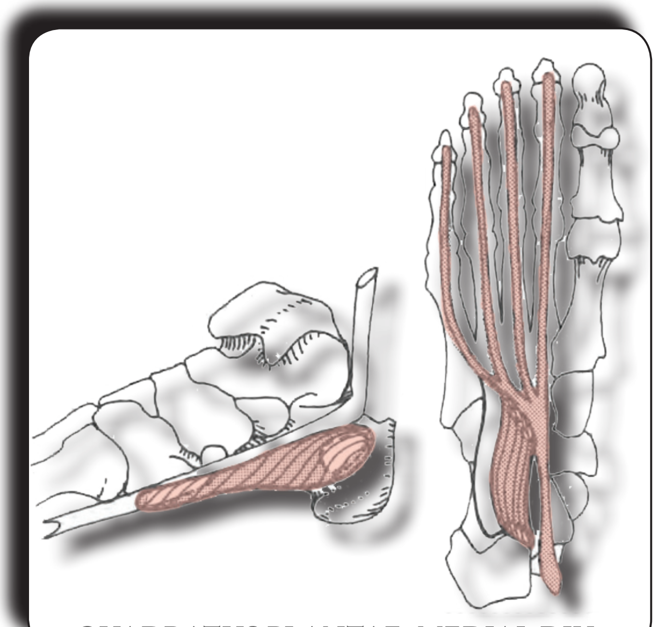
FOOT: In Research

NUTRIENT SOURCE: Vitamin K
1. Chlorophyll (s)

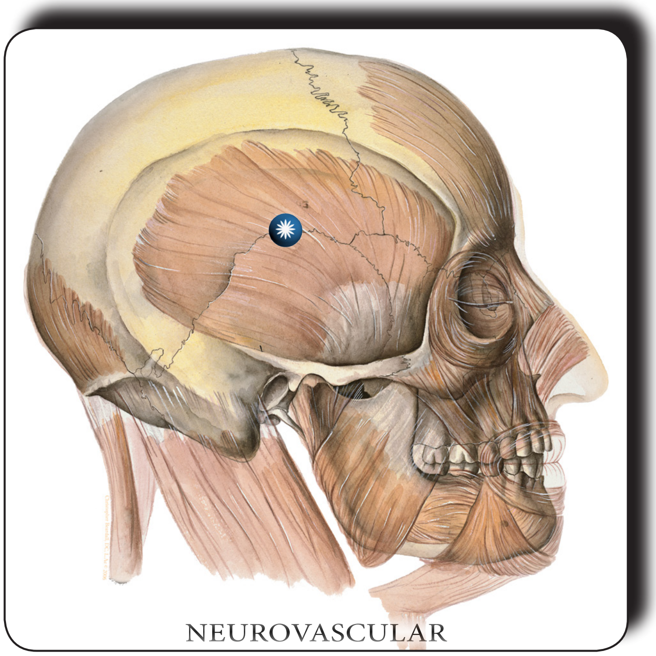


SECTION II:

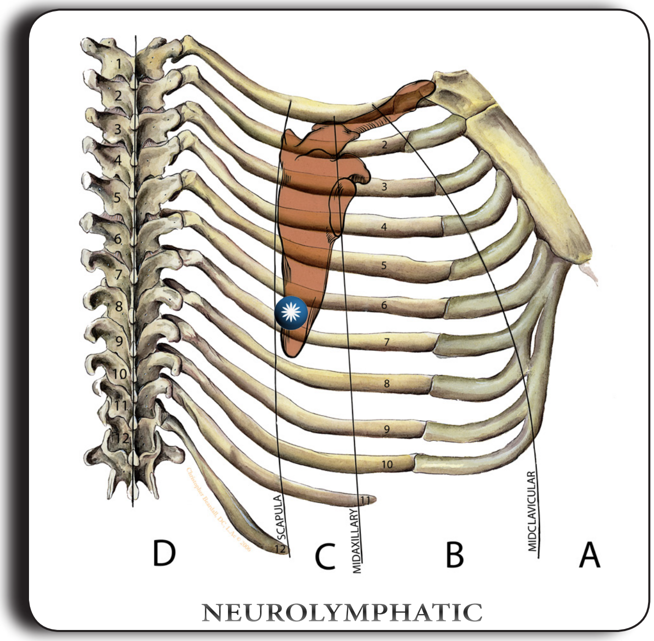
TOES



QUADRATUS PLANTAE, MEDIAL DIV.



NEUROVASCULAR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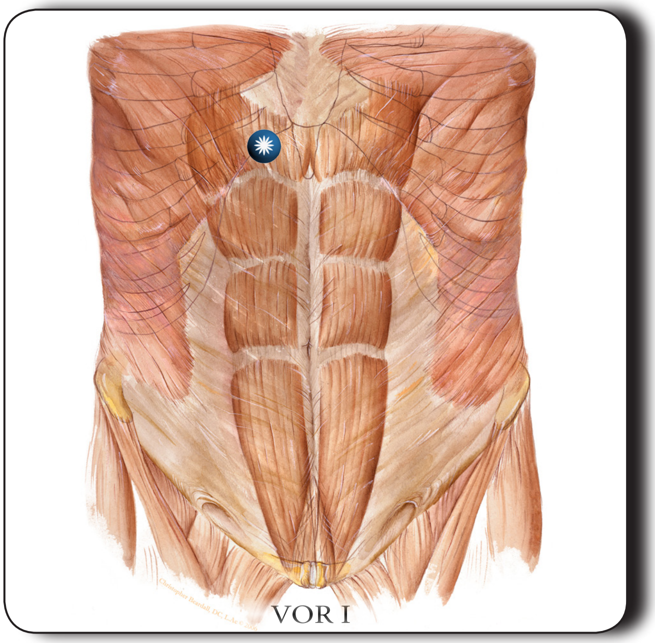
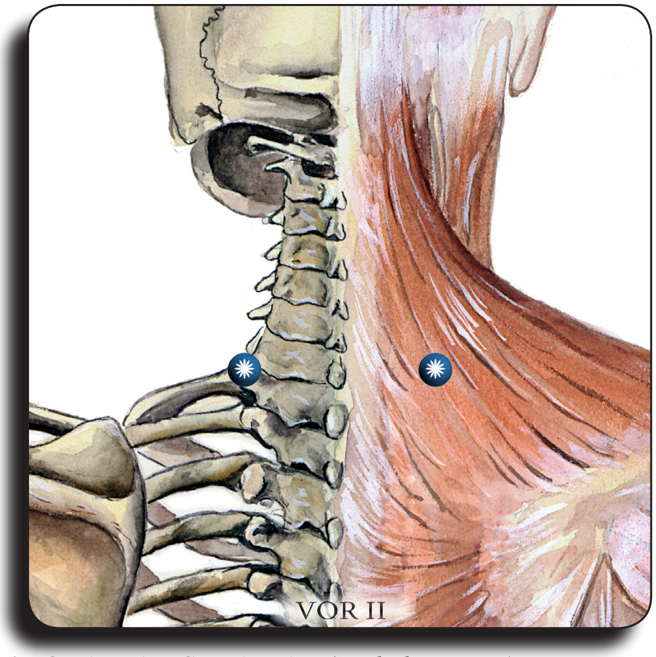
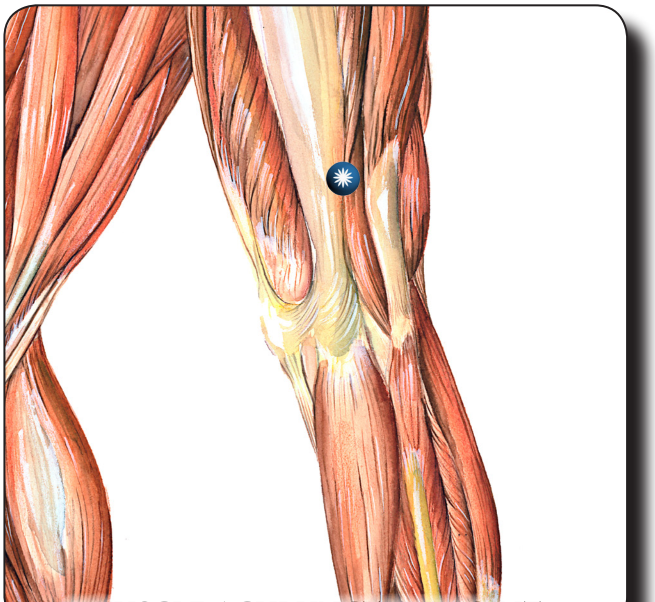
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 942: QUADRATUS PLANTAE, (Medial Division)

ORIGIN: Calcaneus, distal inferior surface.

INSERTION: Tendon of flexor digitorum longus.

ACTION: With the foot in a neutral position, assists in flexion of proximal phalanges of the second and third toes by acting as the origin of flexor digitus pedis (lumbricales) muscle.

TEST:

Patient: Position Supine.
M.T.P. Foot is placed in neutral position.
Plantar flex proximal phalanges of the second and third toes while keeping middle and distal phalanges extended. In this anatomical position this muscle acts as the origin of the flexor digitus pedis (lumbricales) muscle.

Doctor: Position: End of table facing patient.
Brace: Dorsum of metatarsals.
Contact: Base of proximal phalanx of the second and third toes.
Direction: Dorsiflex toe through mid-sagittal plane.

NEUROVASCULAR: (Lat) Squamosal suture - 3" superior, 1/2" posterior to external auditory canal.

NEUROLYMPHATIC: (Post/R) Sixth I.C.S., parascapular.

VISCERAL ORGAN:

I. *Parietal Cells of Stomach:* (Ant/R) Rectus abdominis, fourth section, middle of muscles.

II. *Sublingual Gland:* (Post/BL) C7 transverse process.

M. A. P. : G 32 1/2

V.L. : C4 L

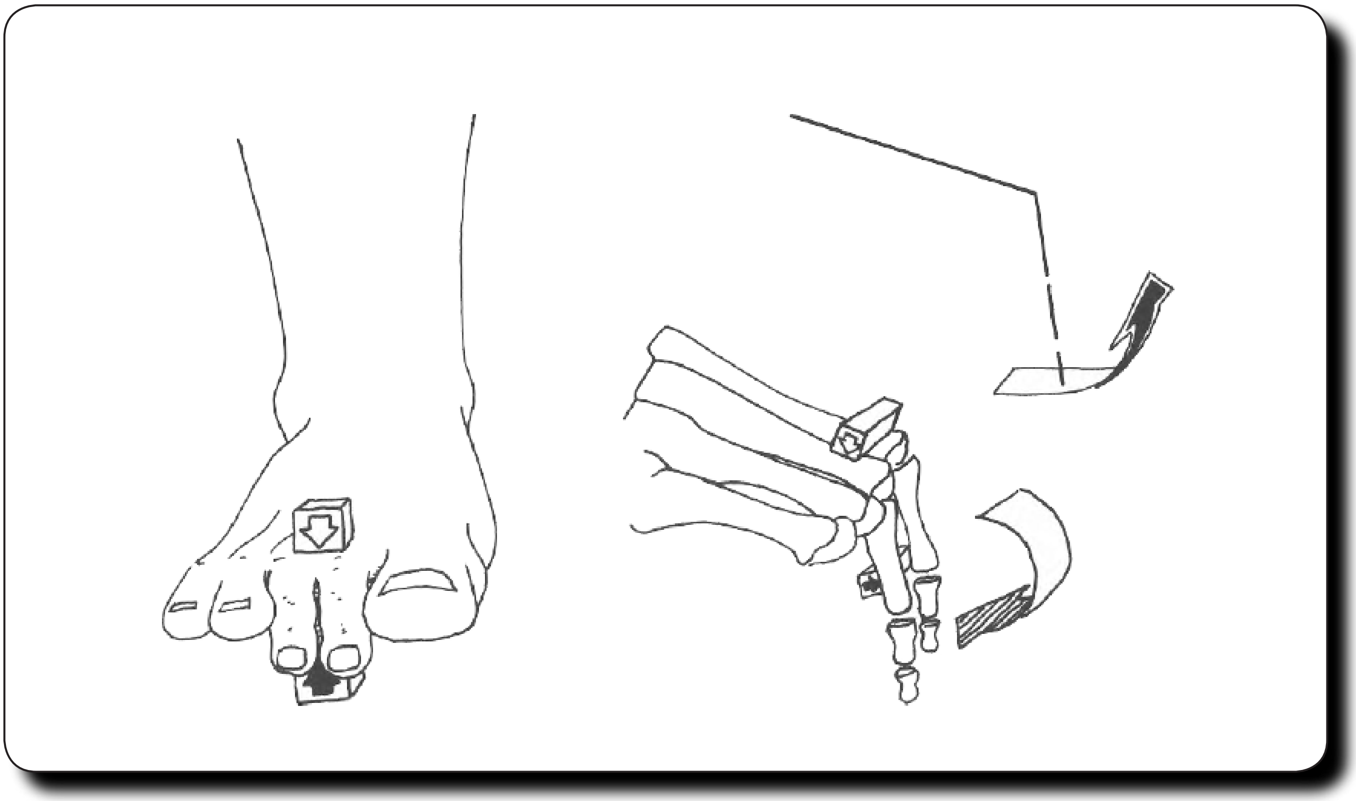
L. B. V.L. : L2 L

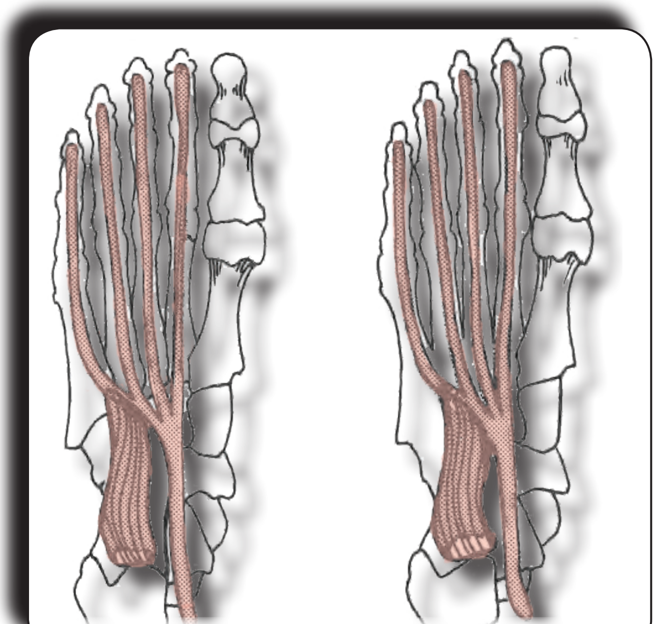
M. M. : S3

CRANIAL: Styloid

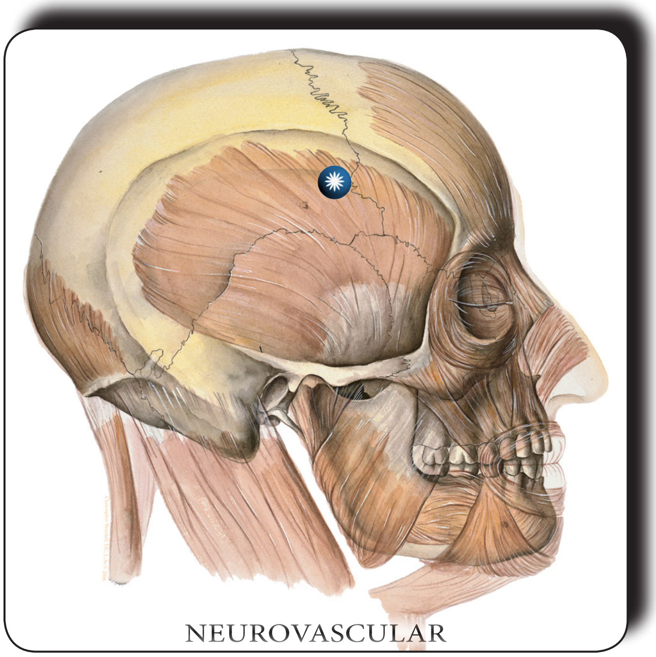
FOOT: Distal Phalanx of Great Toe

NUTRIENT SOURCE: Chloride
1. Betaine Hydrochloride (S)





QUADRATUS PLANTAE, LATERAL DIV.



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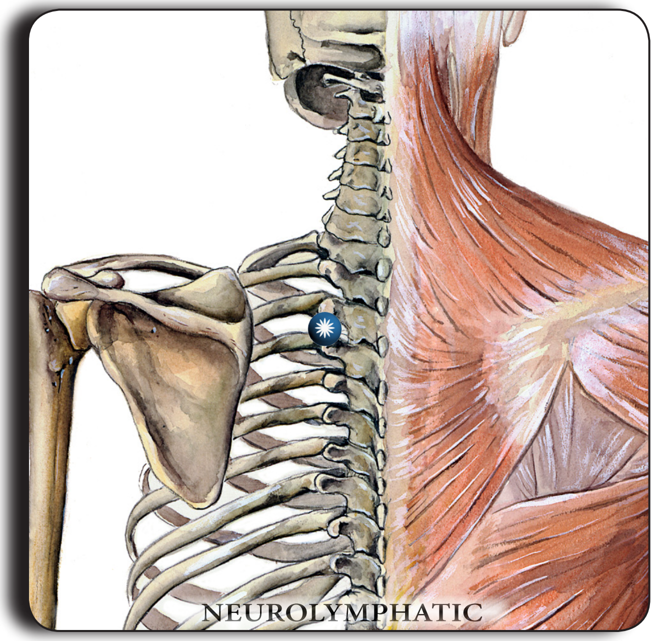

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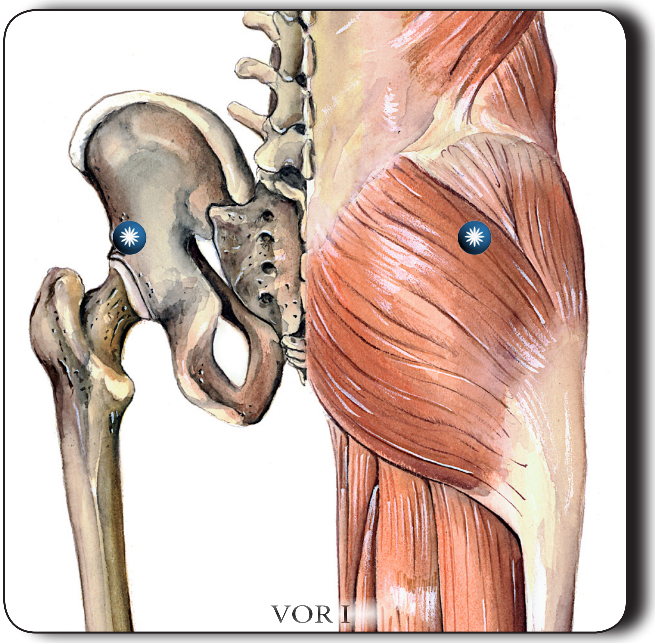
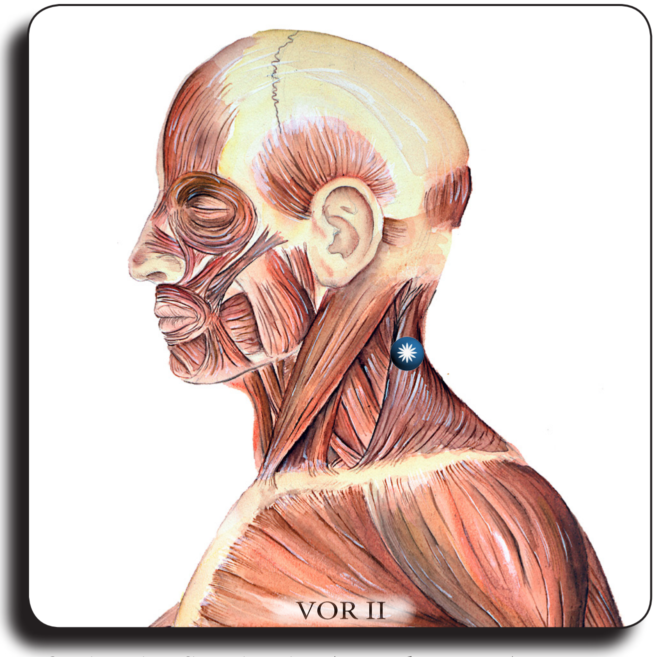
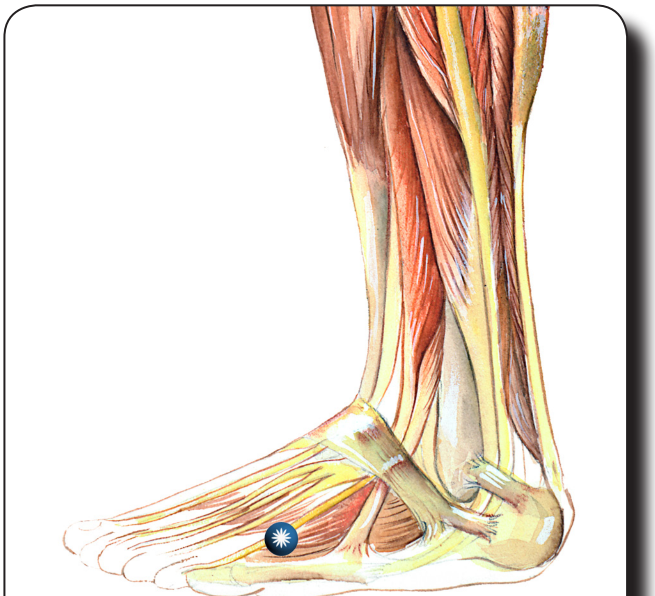


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 944: QUADRATUS PLANTAE, (Lateral Division)

ORIGIN: Lateral inferior border of calcaneus, lateral process of its tuberosity, long plantar ligament.
INSERTION: Lateral margins and upper surfaces of tendon of flexor digitorum longus.
ACTION: With foot in neutral position, assists in flexion of proximal phalanges of the fourth and fifth toes by acting as the origin of flexor digitus pedis (lumbricales) muscle.
TEST:

Patient: Position: Supine.
M.T.P.: Foot is placed in neutral position. Plantar flex proximal phalanges of the fourth and fifth toes while keeping the middle and distal phalanges extended. In this anatomical position this muscle acts as the origin of the flexor digitus pedis (lumbricales) muscle.
Doctor: Position: End of table facing patient.
Brace: Dorsum of metatarsals.
Contact: Base of proximal phalanx of fourth and fifth toes.
Direction: Dorsiflex toes through midsagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, below superior temporal line, 1" posterior to coronal suture, 4" superior, 1" anterior to external auditory canal.

NEUROLYMPHATIC: (Post/L) Third I.C.S. at the spine.

VISCERAL ORGAN:

I. *Penis/Vaginal Vault:* (Post/BL) Belly of gluteus maximus, at level of B 48, 3-4" below crest of ilium.

II. *Larynx:* (Post/BL) G 20.3; level of C3, belly of upper trapezius.

M. A. P. : G 42

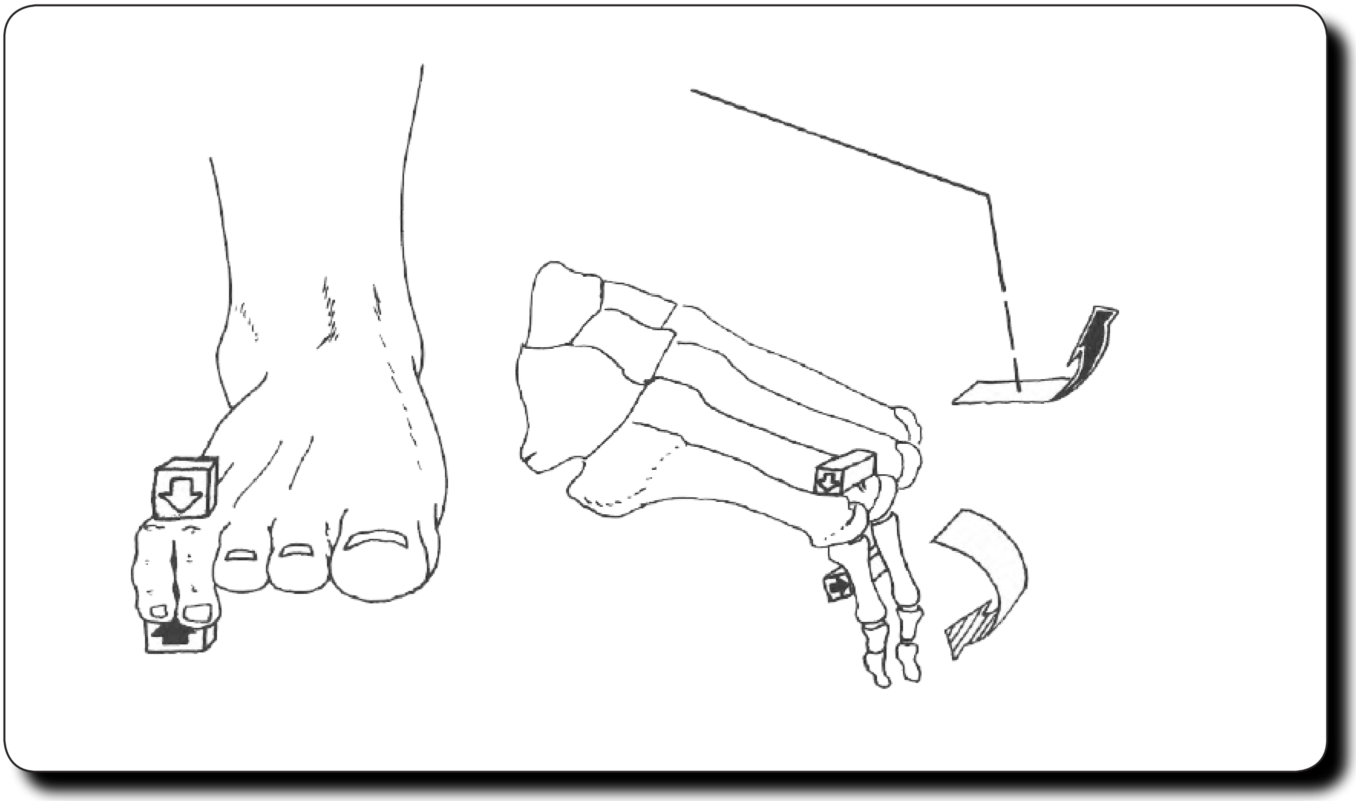
V.L. : T11 L
L. B. V.L. : C7 L

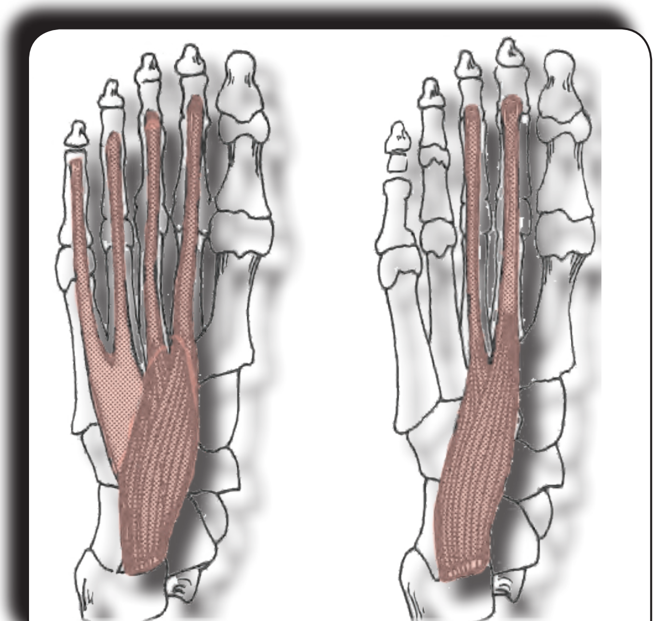
M. M. : S2

CRANIAL: Mandible

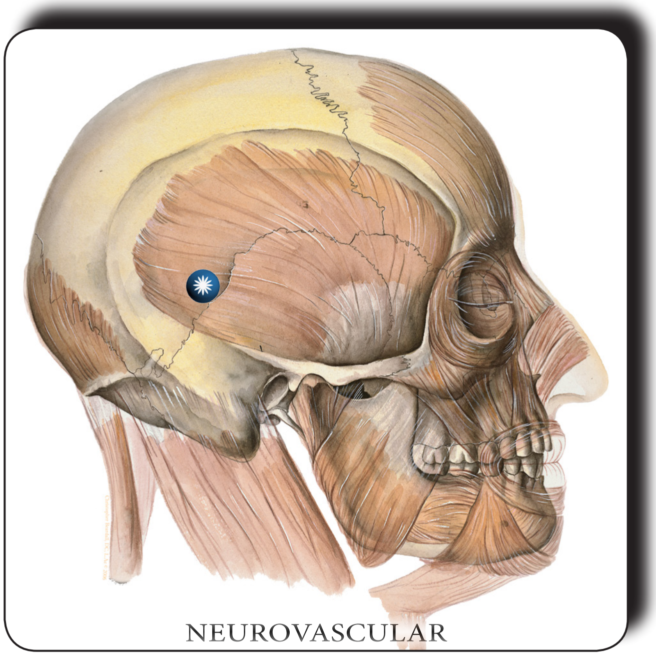
FOOT: First Phalanx of Great Toe.

NUTRIENT SOURCE: Niacin
1.Niacinamide and B6 (S)
2.Core Niacin (N.W.)

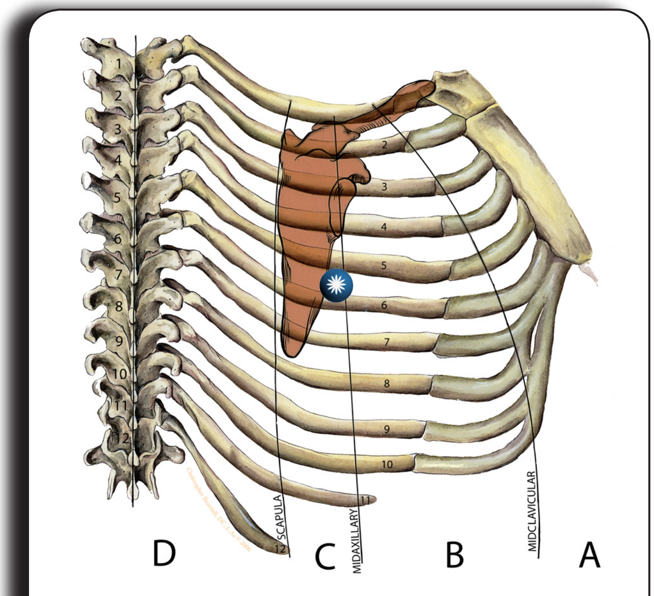




FLEXOR DIGITORUM BREVIS, MEDIAL DIV.



NEUROVASCULAR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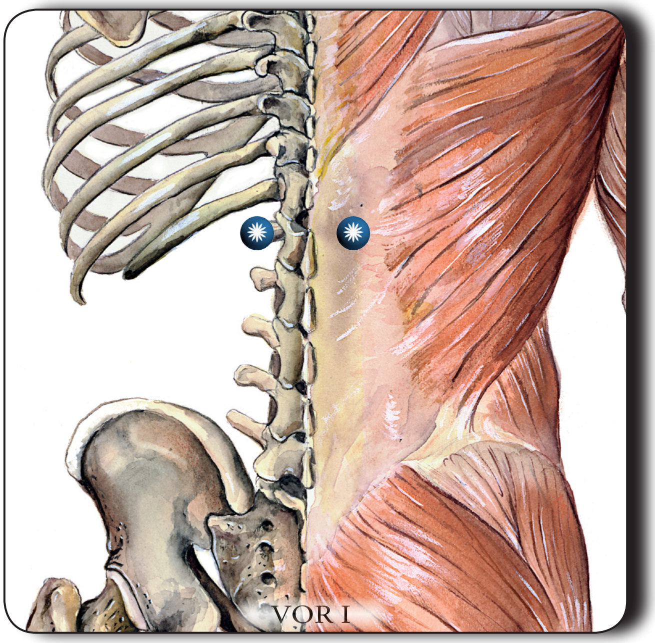
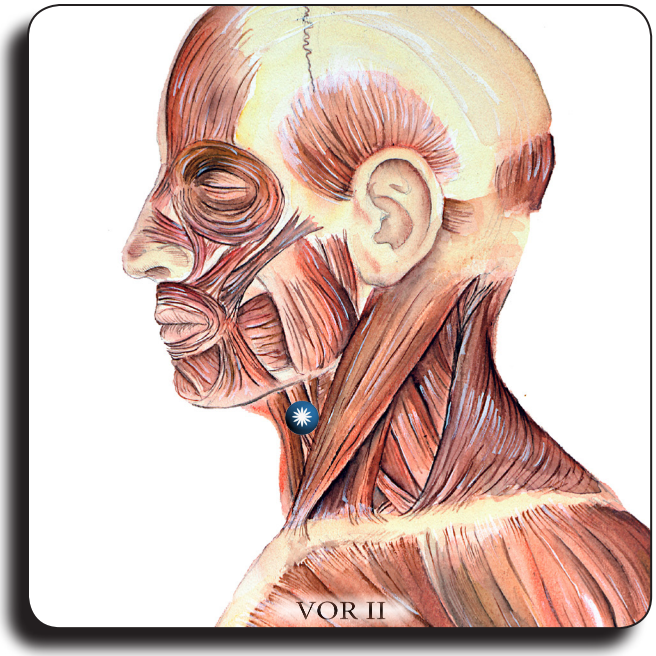
NEUROLYMPHATIC



VOR I



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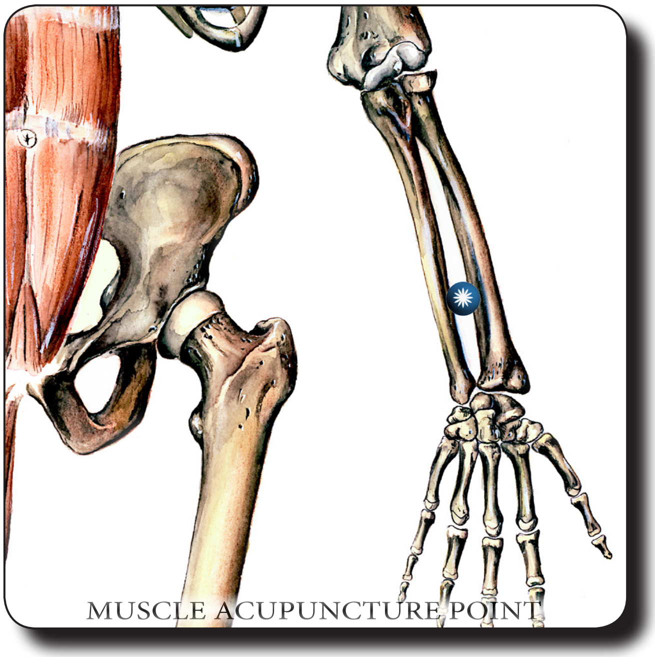


MUSCLE ACUPUNCTURE POINT

Muscle 946: FLEXOR DIGITORUM BREVIS, (Medial Division)

ORIGIN: Medial process of tuberosity of calcaneus, central part of plantar aponeurosis and intermuscular septa.

INSERTION: Sides of the middle phalanx of the second and third toes.

ACTION: Flexes the middle phalanges of the second and third toes.

TEST:

Patient: Position: Supine.
M.T.P.: Flex the middle phalanx of the second and third toes. Keep the toes in a neutral position with the distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace: Dorsum of proximal phalanges.
Contact: Base of middle phalanx of the toe.
Keep proximal phalanx straight, middle phalanx flexed and distal phalanx extended.
Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, 3” superior and 2 1/2” posterior to ear.

NEUROLYMPHATIC: (Ant/R) Fifth I.C.S., parahumeral.

VISCERAL ORGAN:

I. *Ductus Deferens:* (Post/BL) B 21; L1 transverse processes.

II. *Larynx:* (Ant/BL) St 9 at thyroid cartilage.

M. A. P. : Cx 6

V.L. : T6 R

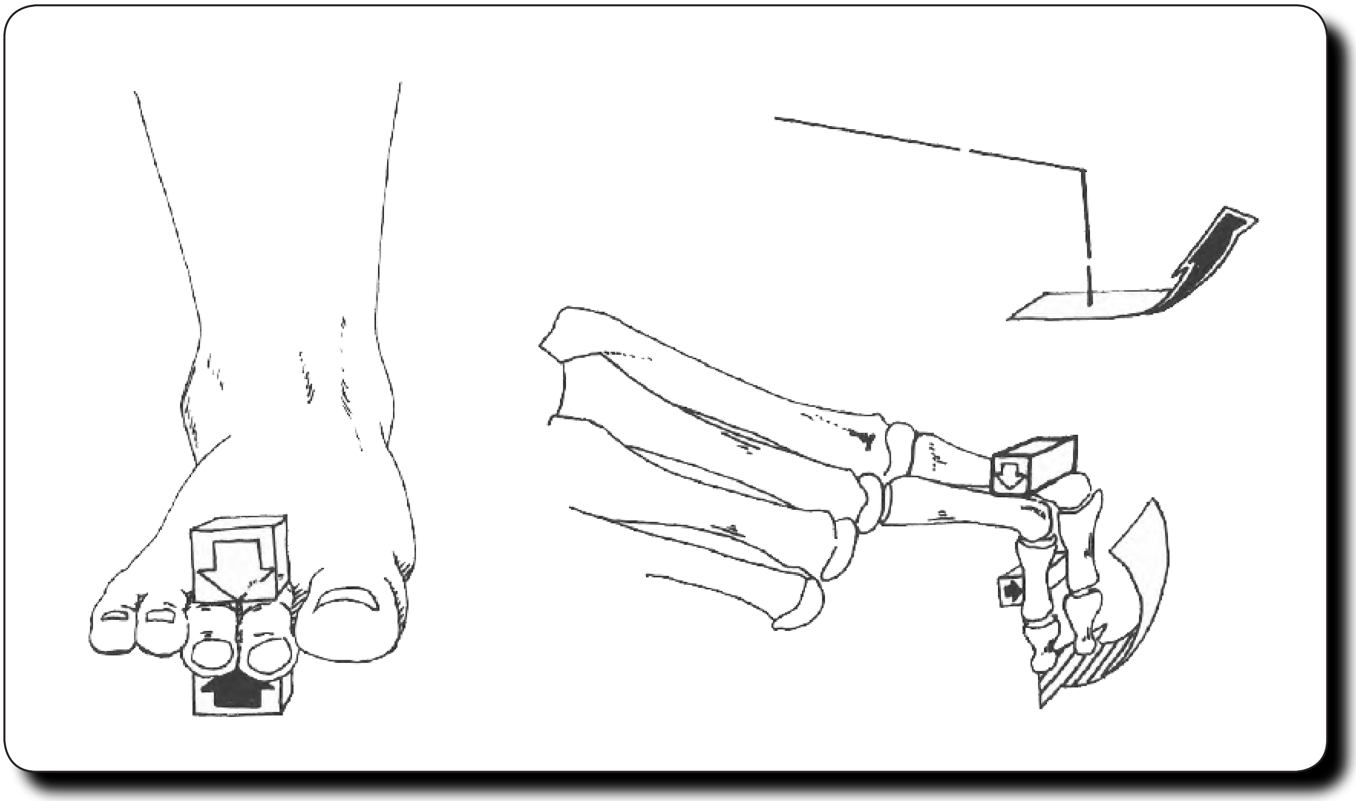
L. B. V.L. : T5 R

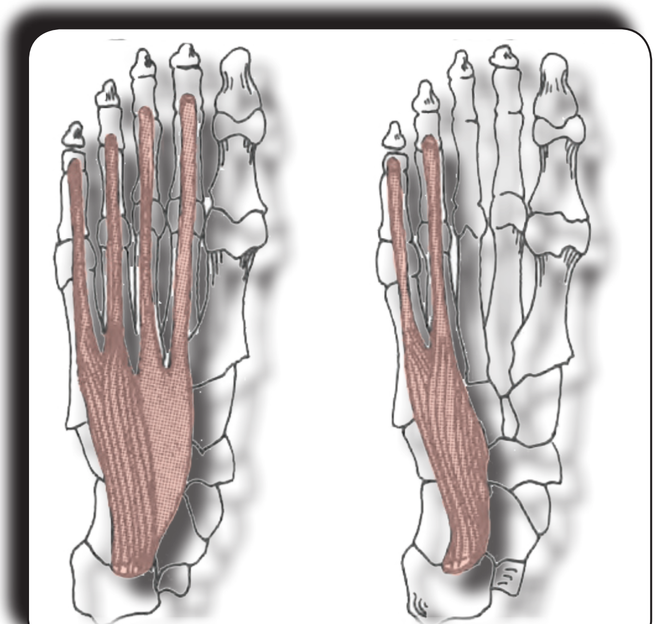
M. M. : S1

CRANIAL: Ethmoid

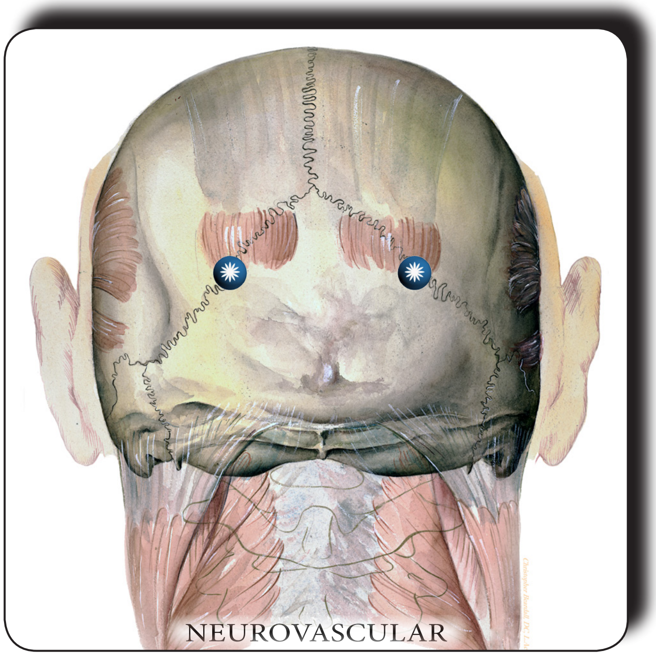
FOOT: First Cuneiform

NUTRIENT SOURCE: Selenium
1. Core Selenium (N.W.)
2. Selenium Chelate (N.W.)

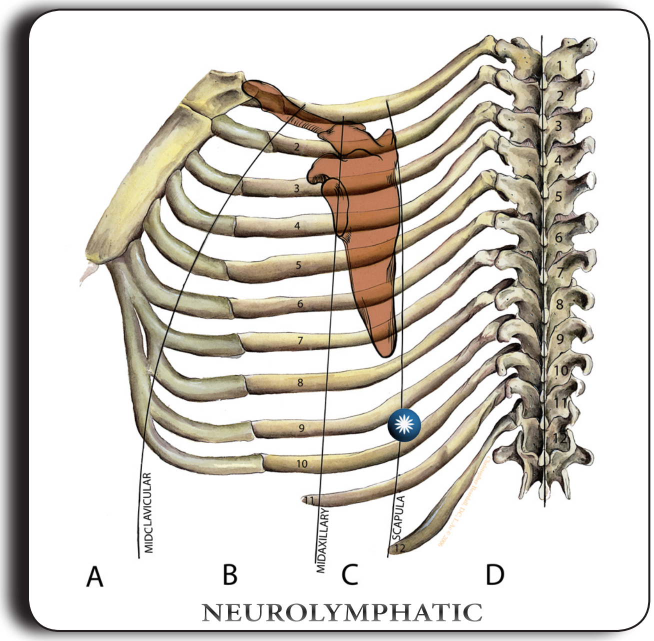




FLEXOR DIGITORUM BREVIS, LATERAL DIV.



NEUROVASCULAR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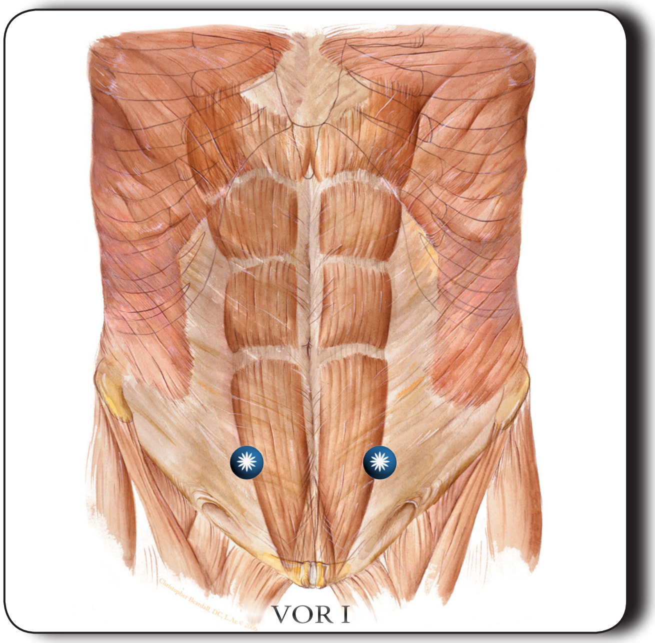
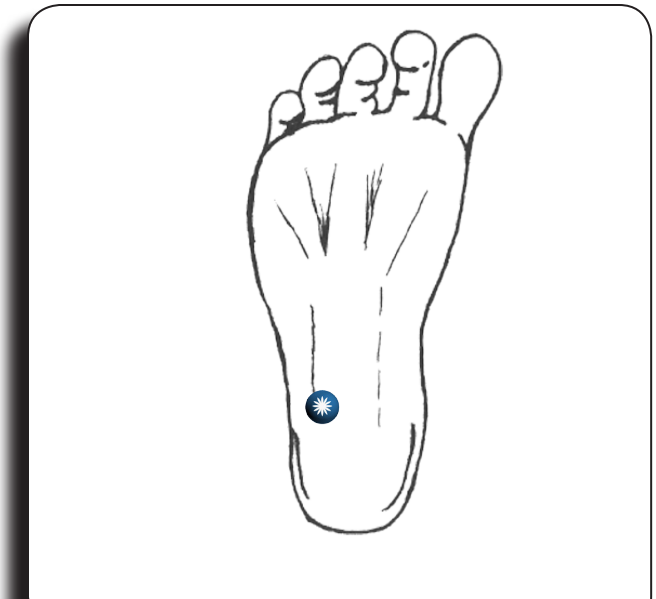
NEUROLYMPHATIC



VOR I



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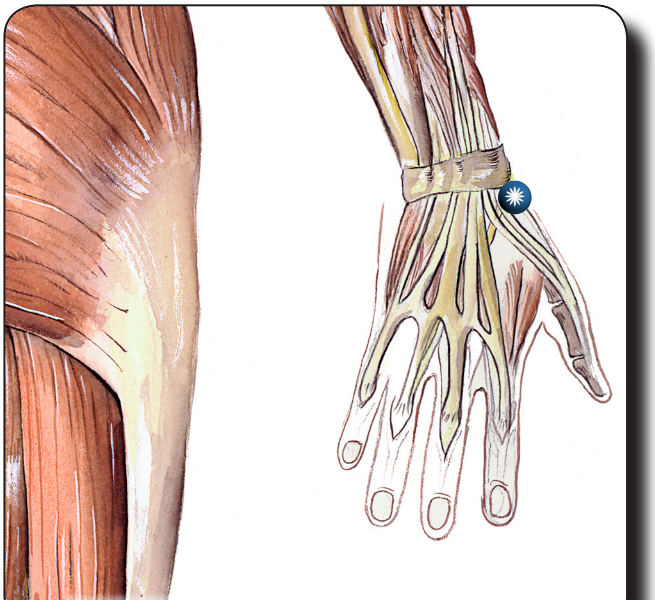


MUSCLE ACUPUNCTURE POINT

Muscle 948: FLEXOR DIGITORUM BREVIS, (Lateral Division)

ORIGIN: Medial process of tuberosity of calcaneus, central part of plantar aponeurosis and adjacent intermuscular septa.

INSERTION: Middle phalanx of the fourth and fifth toes.

ACTION: Flexes the middle phalanx of the fourth and fifth toes.

TEST:

Patient: Position: Supine.
M.T.P.: Flex the middle phalanx of the fourth and fifth toes. Keep the toes in a neutral position with the distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace: Dorsum of proximal phalanges.
Contact: Base of middle phalanx of toe. Keep proximal phalanx straight,middle phalanx flexed and distal phalanx extended.
Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Post/BL) Lambdoidal suture, 2” lateral to posterior fontanelle.

NEUROLYMPHATIC: (Post/L) Ninth I.C.S., 4” out from spine.

VISCERAL ORGAN:

I. *Colon - L-Descending; R-Ascending*: (Ant/BL) Rectus abdominis, first section, lateral border.

II. *Salivary Glands - Sublingual*: (BL) Plantar surface of cuboid.

M. A. P. : Li 5

V.L. : T5 L

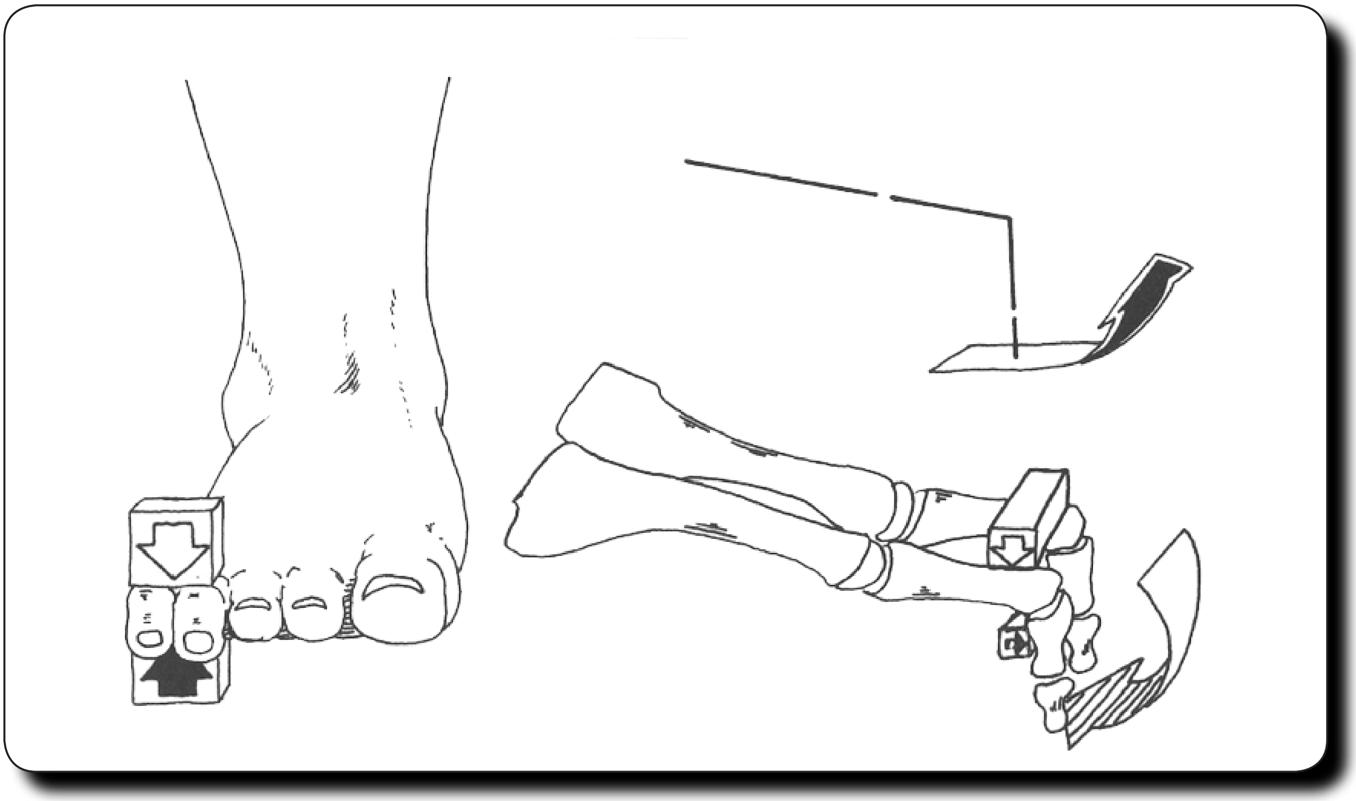
L. B. V.L. : T6 L

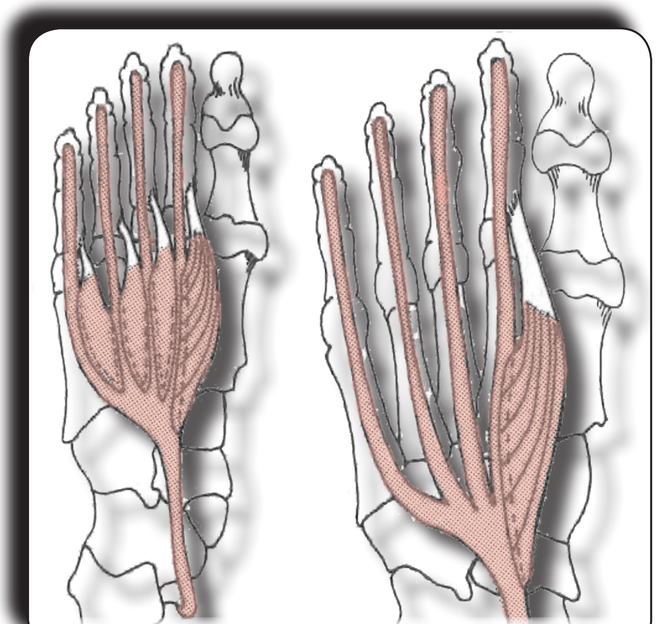
M. M. : L5

CRANIAL: Glabella

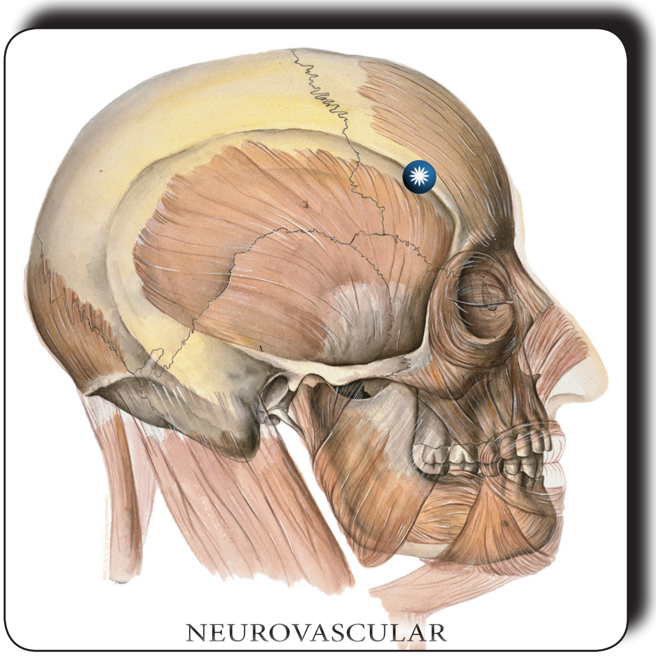
FOOT: Third Cuneiform

NUTRIENT SOURCE: Biotin
1. Core Biotin (N.W.)

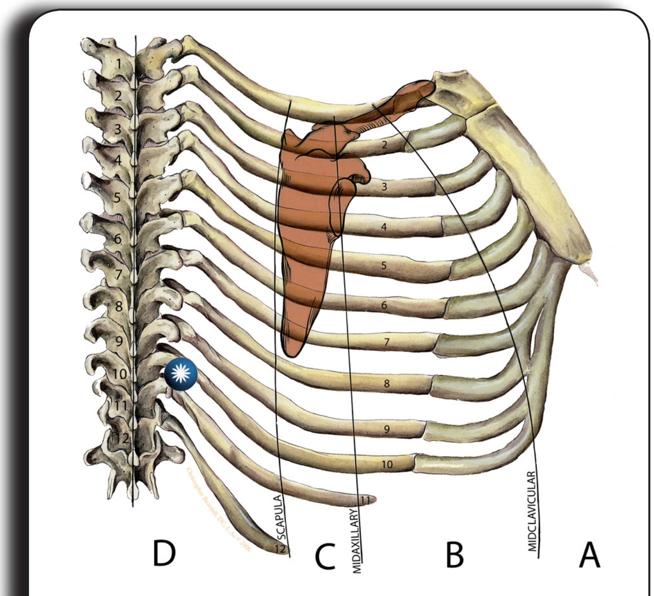




FLEXOR DIGITUS PEDIS, SECOND



NEUROVASCULAR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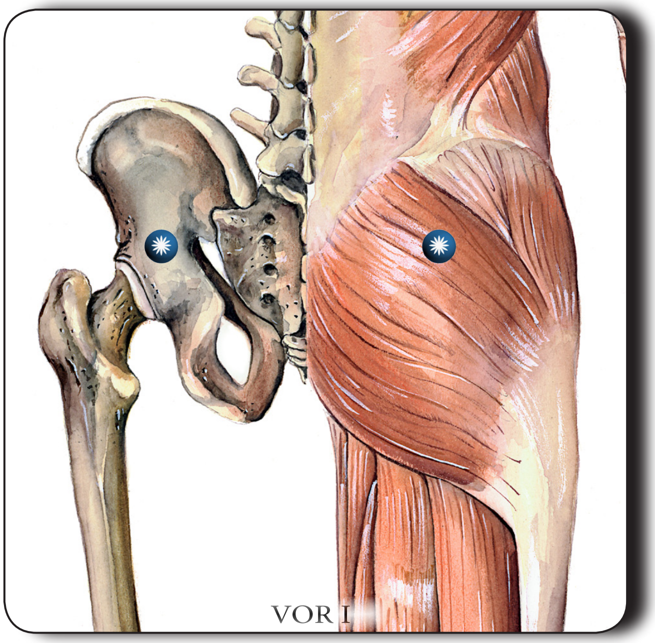
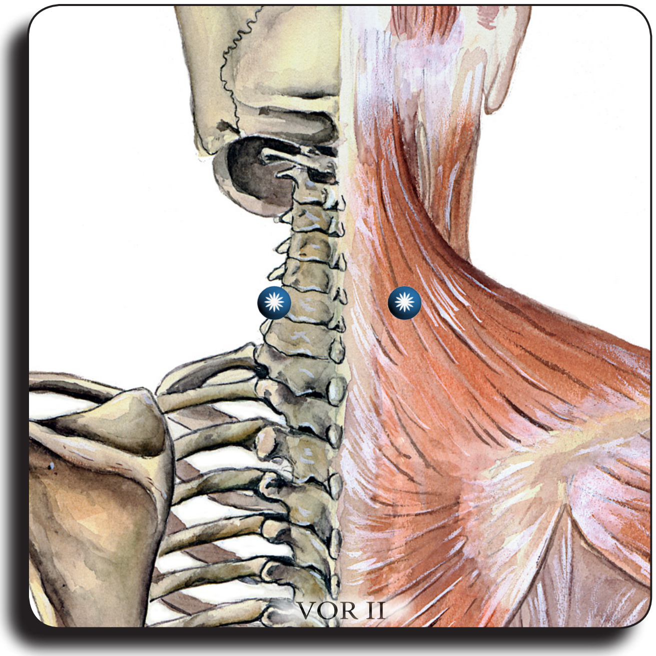
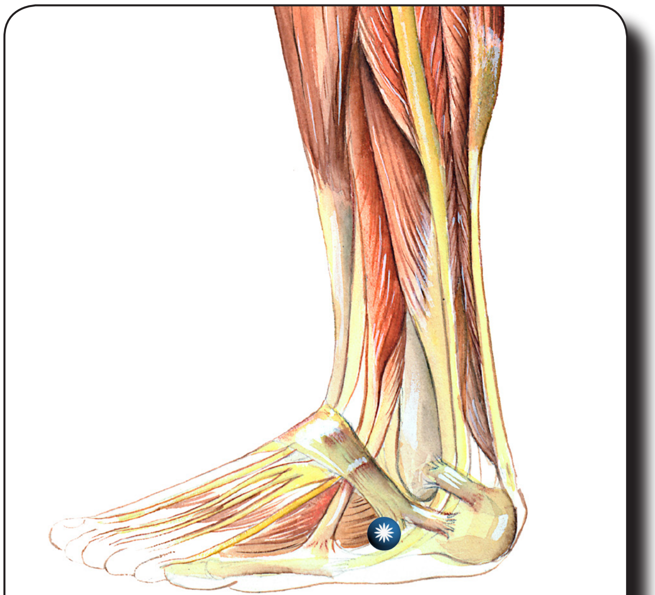
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 950: FLEXOR DIGITUS PEDIS, Second (Lumbricales Pedis, First Division)

ORIGIN: Tendon of flexor digitorum longus at the angle of division, medial side of tendon.

INSERTION: Dorsal surface of the proximal phalanx of second toe, medial side.

ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the second toe. Especially active in flexion while toes are in an extended position. (Note illustration.)

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.
Doctor: Position: At end of table facing patient.
Brace: Dorsum of metatarsals.
Contact: Base of proximal phalanx of second toe. Support dorsum of toe to maintain middle and distal extension.
Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Frontal bone, superior to superior temporal line, 2" posterior to supraorbital ridge.

NEUROLYMPHATIC: (Post/R) Tenth I.C.S. at the spine.

VISCERAL ORGAN:

I. *Lymphatics of Ileum:* (Post/BL) Belly of iliac division of gluteus maximus, lateral and inferior to B 48.

II. *Sinuses - Maxillary:* (Post/BL) C6 transverse process, posterior tip.

M. A. P. : B 62.5 (See Acupuncture Charts in Instruction Manual).

V.L. : T10 R

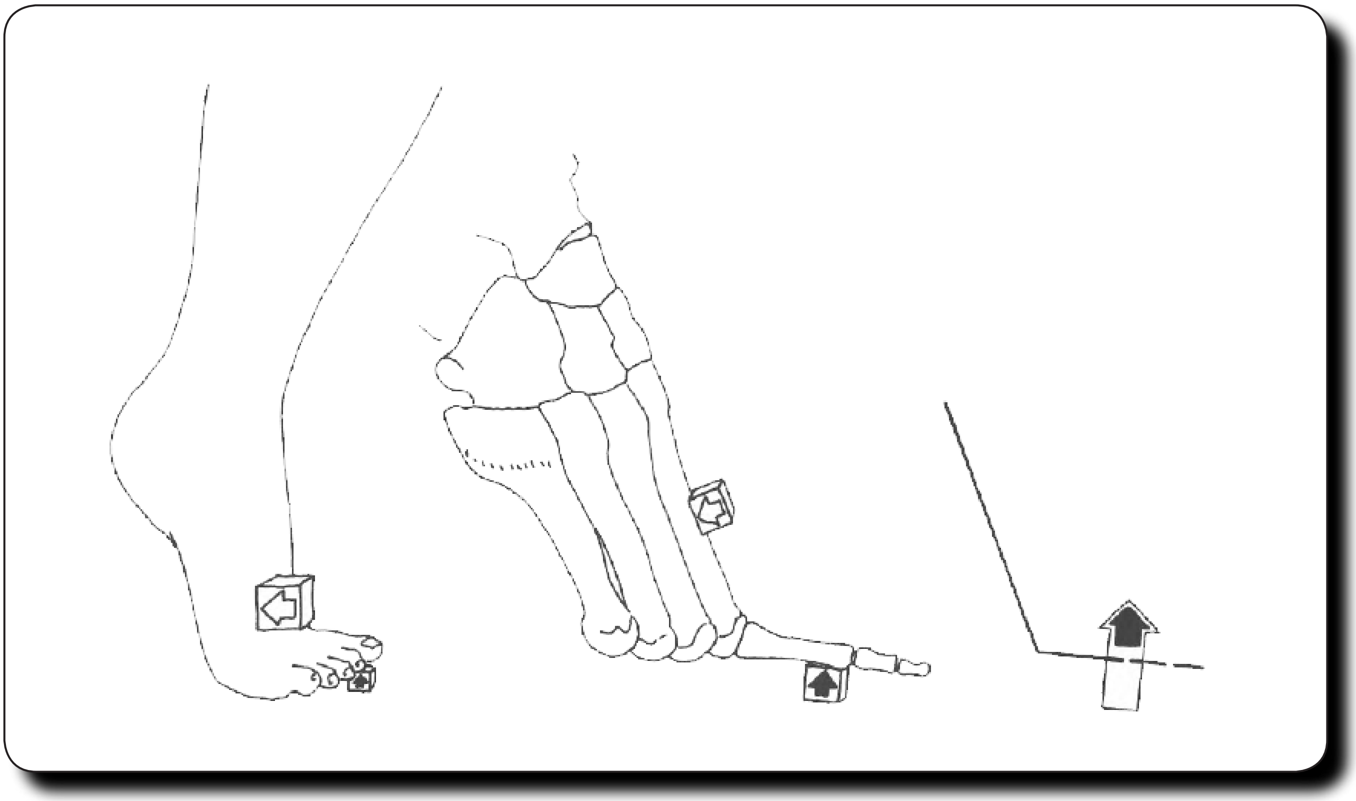
L. B. V.L. : T1 R

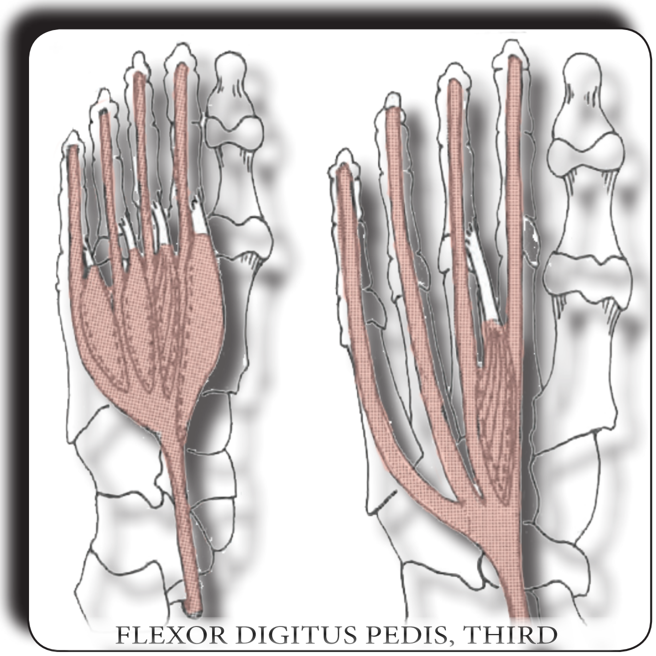
M. M. : S2

CRANIAL: Inferior Conchae

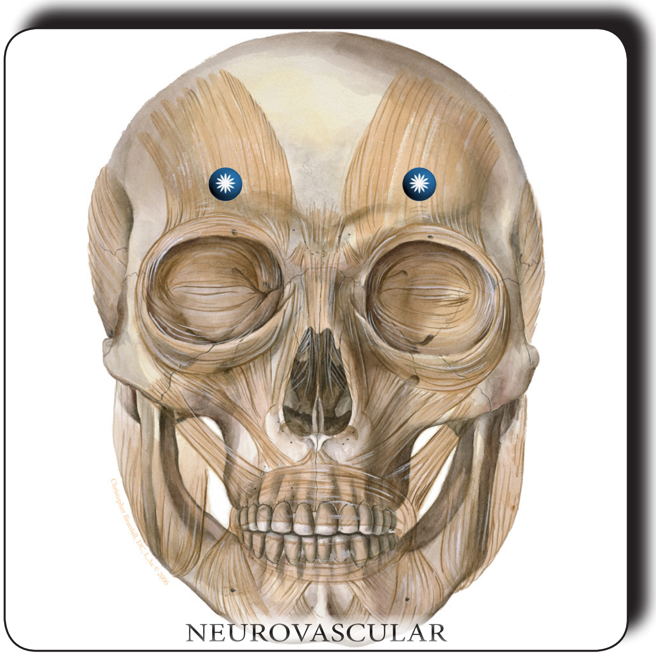
FOOT: Proximal Phalanx of Second Toe.

NUTRIENT SOURCE: Phosphorus
1. Core Phosphorus (N.W.)
2. Phosfood (S)
3. Phos Tabs (N.W.)

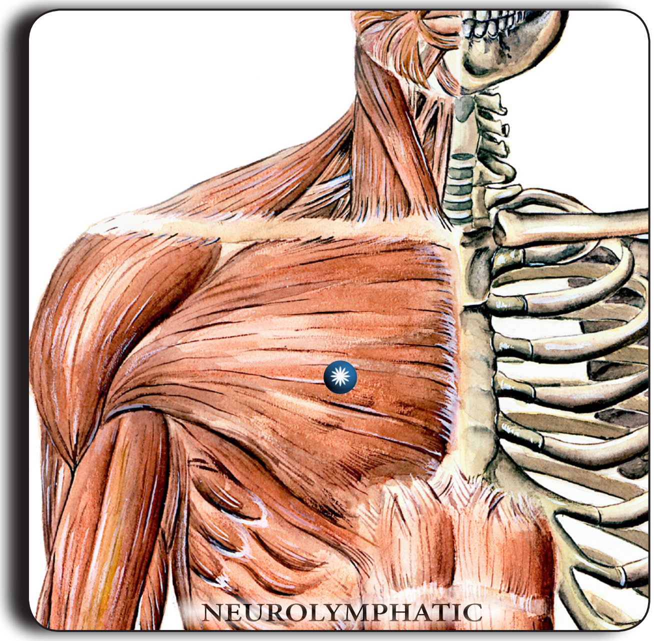




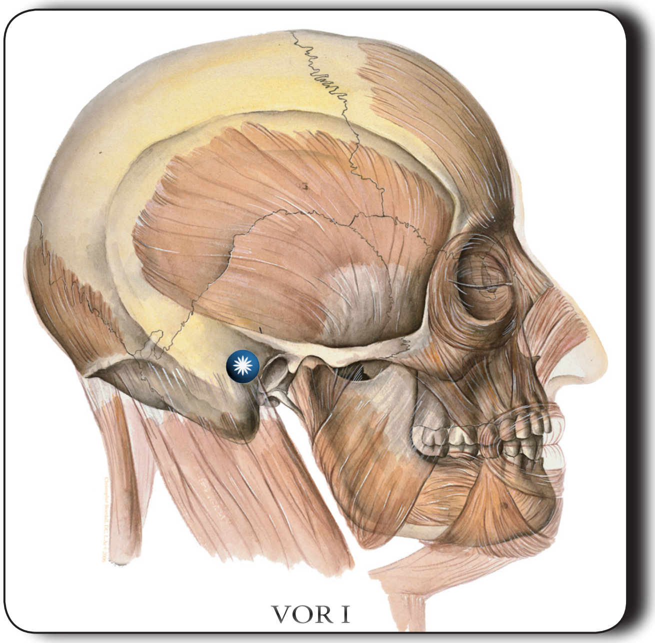
FLEXOR DIGITUS PEDIS, THIRD



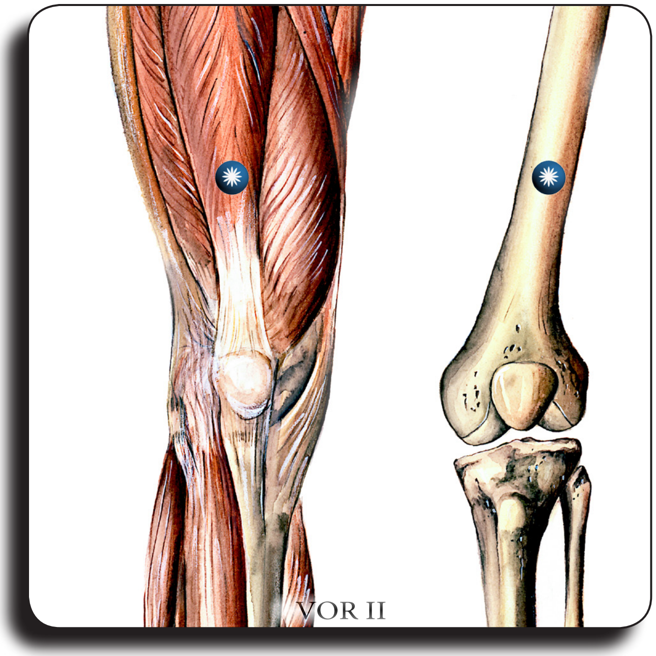
NEUROVASCULAR



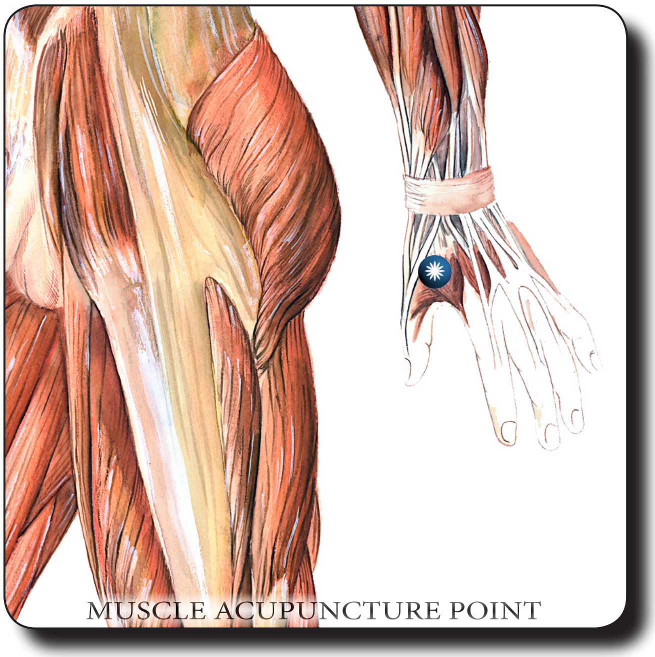
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 952: FLEXOR DIGITUS PEDIS, Third (Lumbricales Pedis, Second Division)

ORIGIN: Tendon of flexor digitorum longus at its angle of division.

INSERTION: Passes forward medial side of third toe.

ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the third toe. Especially active in flexion while toes are in an extended position. (Note illustration.)

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.

Doctor: Position: End of table facing patient.
Brace: Dorsum of metatarsals.
Contact: Base of proximal phalanx of third toe. Support dorsum of toe to maintain middle and distal extension.
Direction: Dorsiflex toe through midsagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, below frontal prominence.

NEUROLYMPHATIC: (Ant/R) Third I.C.S., 1" lateral to sternum.

VISCERAL ORGAN:

I. *Ear - External:* (Lat/BL) T 18, posterior and inferior to ear.

II. *Kidney:* (Ant/BL) Thigh, anterior surface, in belly of rectus femoris, 1" superior to where the muscle turns to tendon.

M. A. P. : Li 4.2

V.L. : T11 L

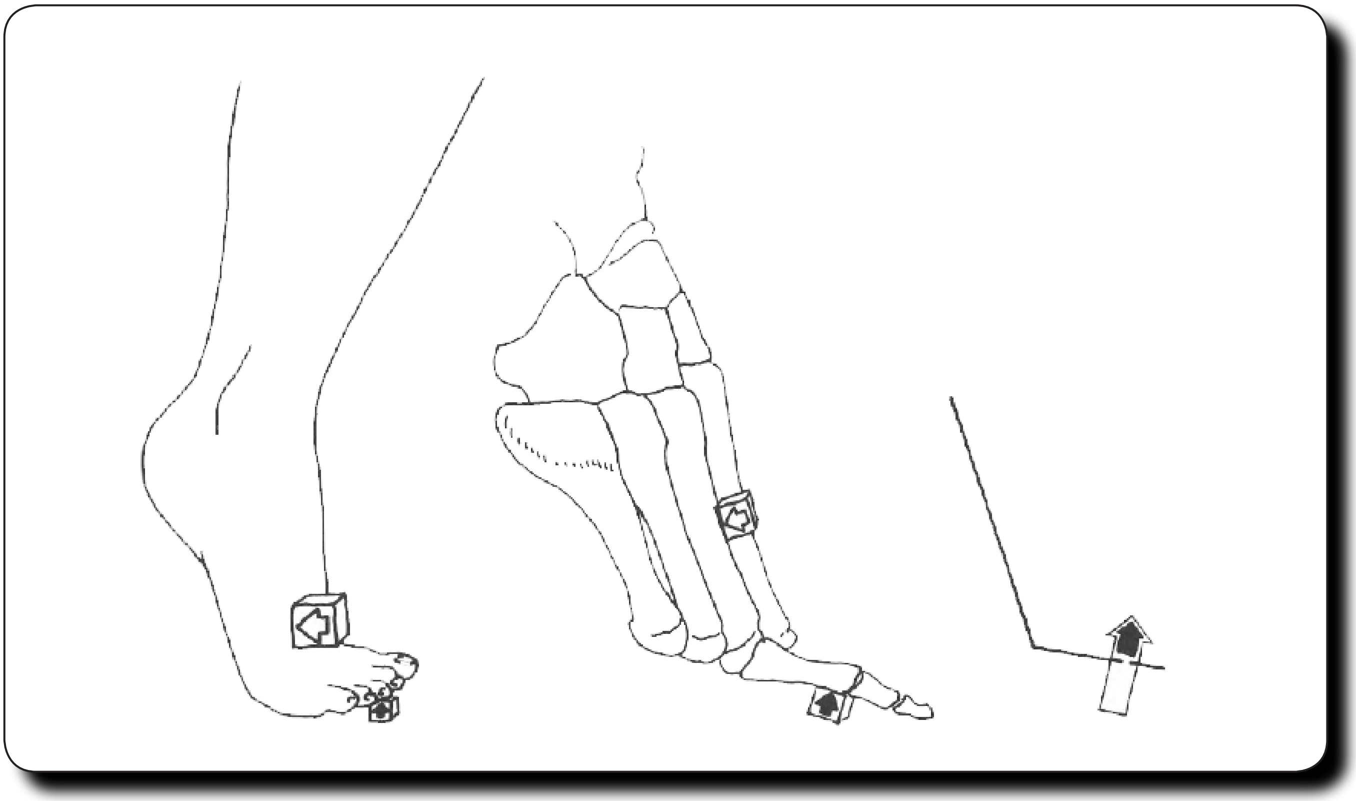
L. B. V.L. : C7 L

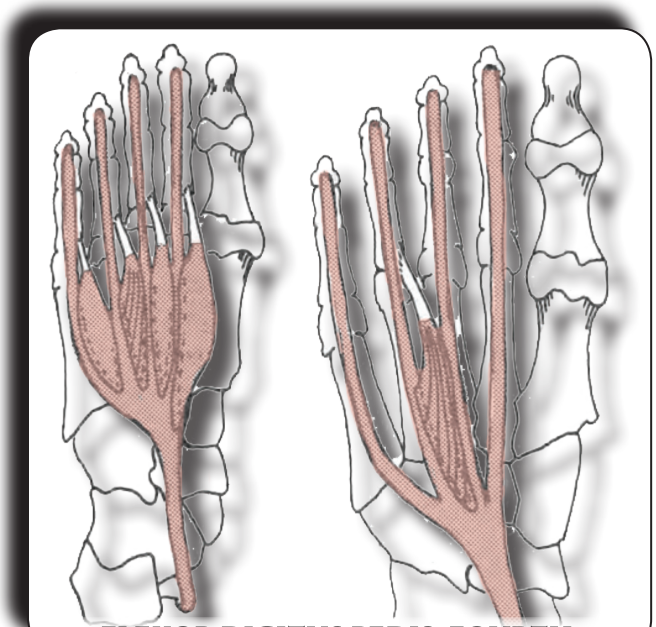
M. M. : S2

CRANIAL: In Research

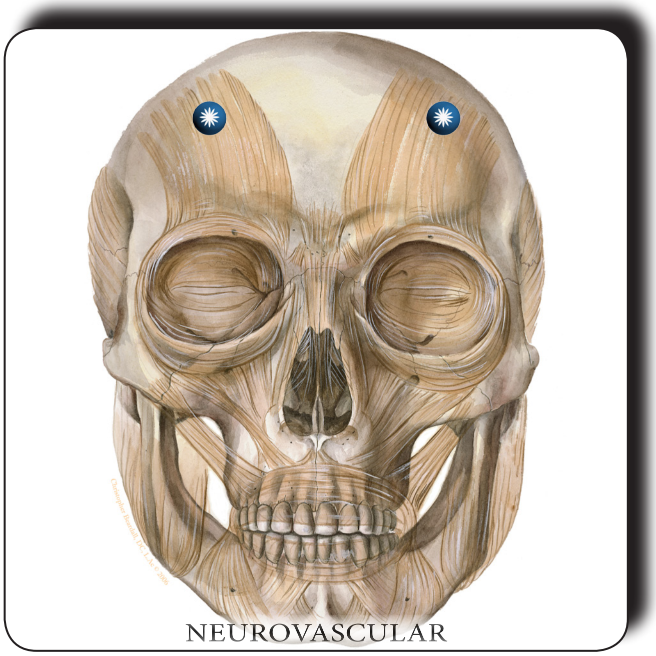
FOOT: In Research

NUTRIENT SOURCE: In Research

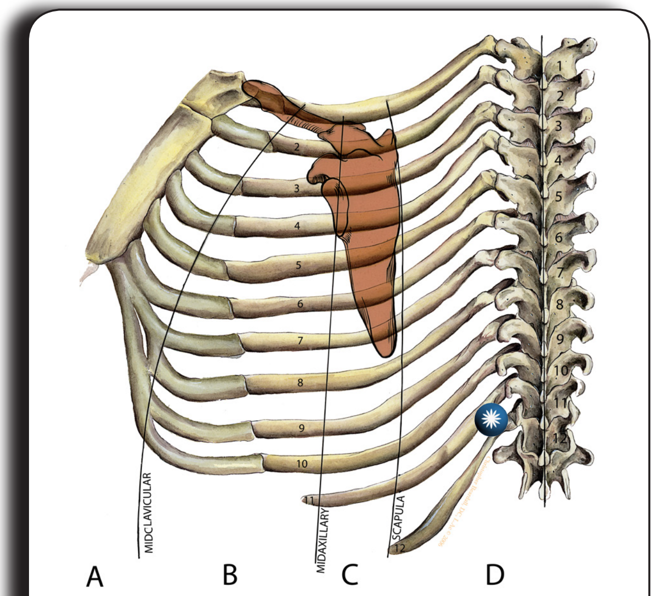




FLEXOR DIGITUS PEDIS, FOURTH



NEUROVASCULAR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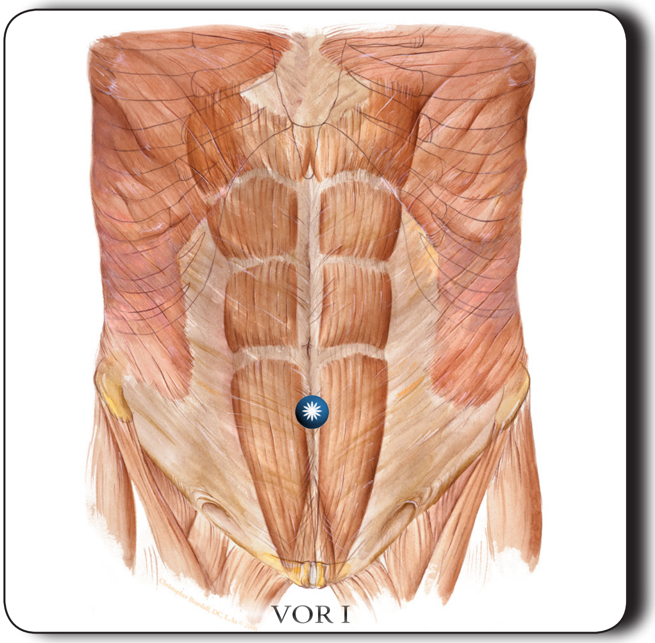
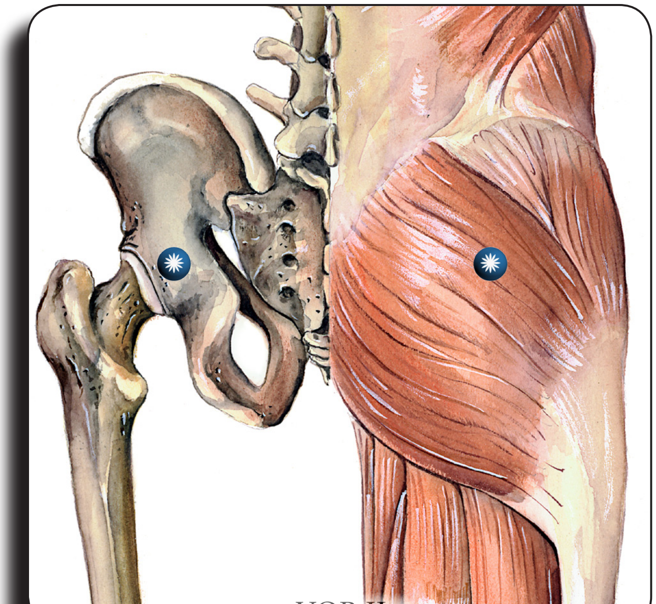
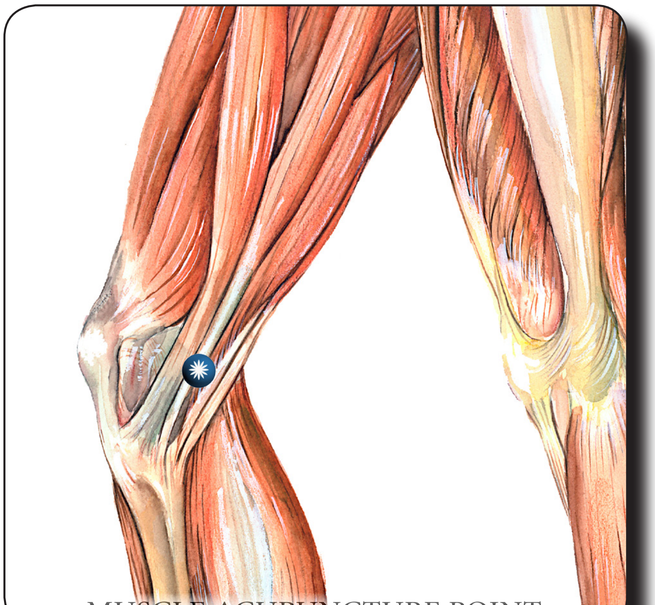


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 954: FLEXOR DIGITUS PEDIS, Fourth (Lumbricales Pedis, Third Division)

ORIGIN: Tendon of flexor digitorum longus at the angle of division.

INSERTION: Dorsal surface of the first phalanx of the fourth toe.

ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the fourth toe. Especially active in flexion while toes are in an extended position. (Note illustration.)

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.
Doctor: Position: End of table facing patient.
Brace: Dorsum of metatarsals.
Contact: Base of proximal phalanx of fourth toe. Support dorsum of toe to maintain middle and distal extension.
Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, superior and medial to frontal eminence.

NEUROLYMPHATIC: (Post/L) Eleventh I.C.S., at transverse process of vertebra.

VISCERAL ORGAN:

I. *Thymus:* (Ant/Midline) Cv 5, 3/4 of the distance between pubes and umbilicus.

II. *Penis/Vaginal Vault:* (Post/BL) Belly of gluteus maximus, superior and lateral to B 49.

M. A. P. : Lv 8.5

V.L. : T1 L

L. B. V.L. : T10 L

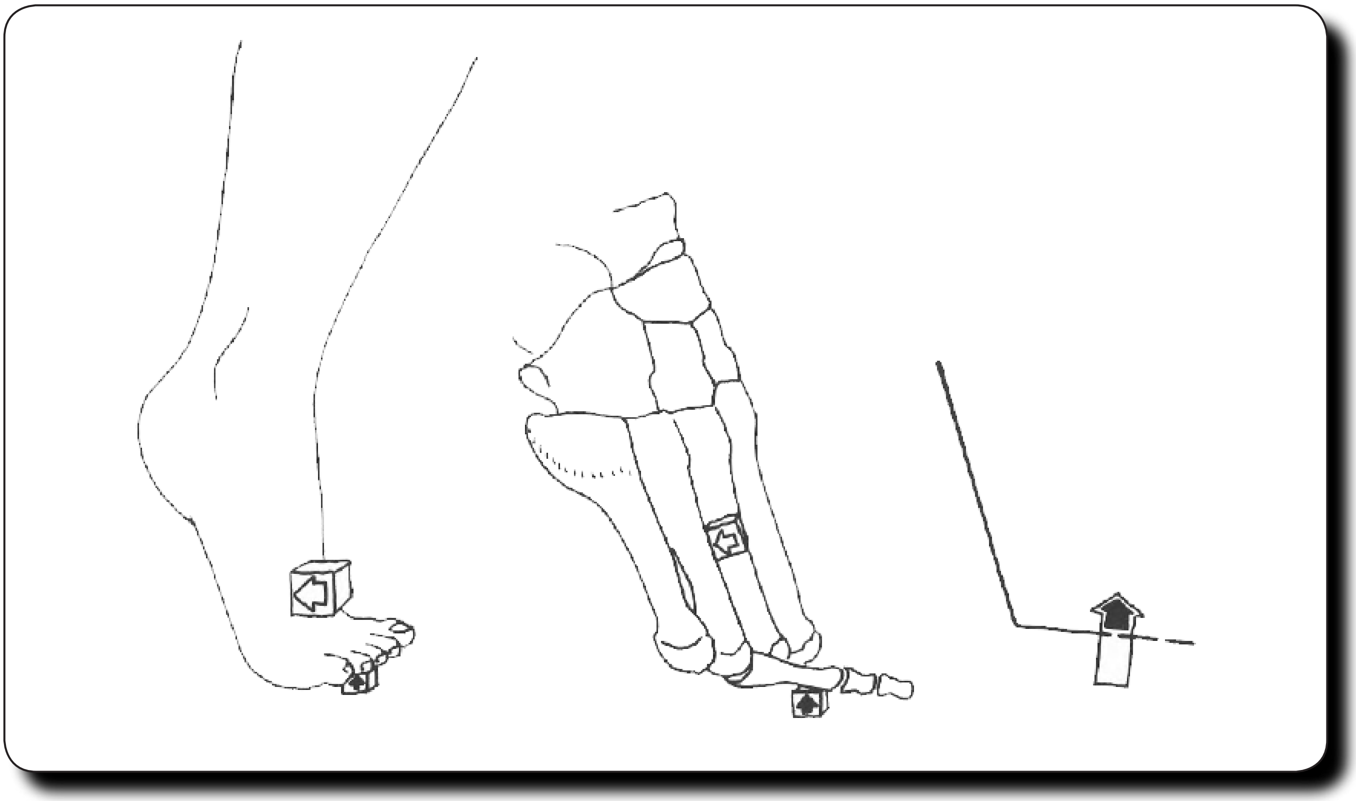
M. M. : S3

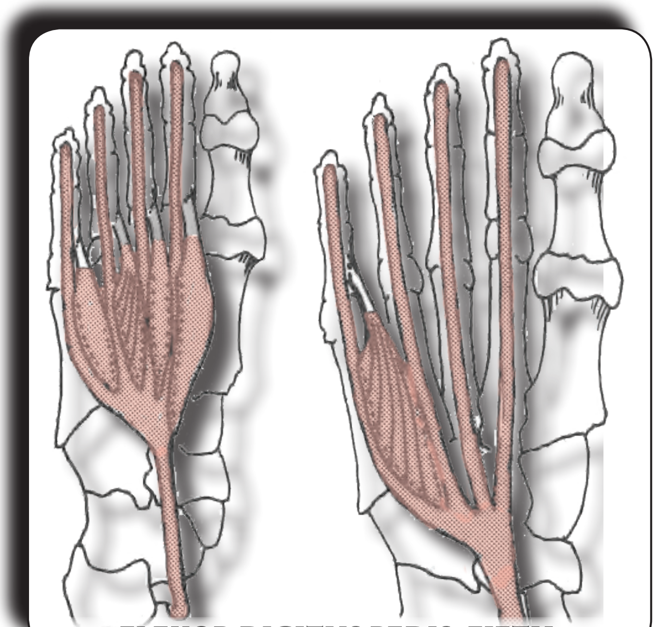
CRANIAL: Ethmoid

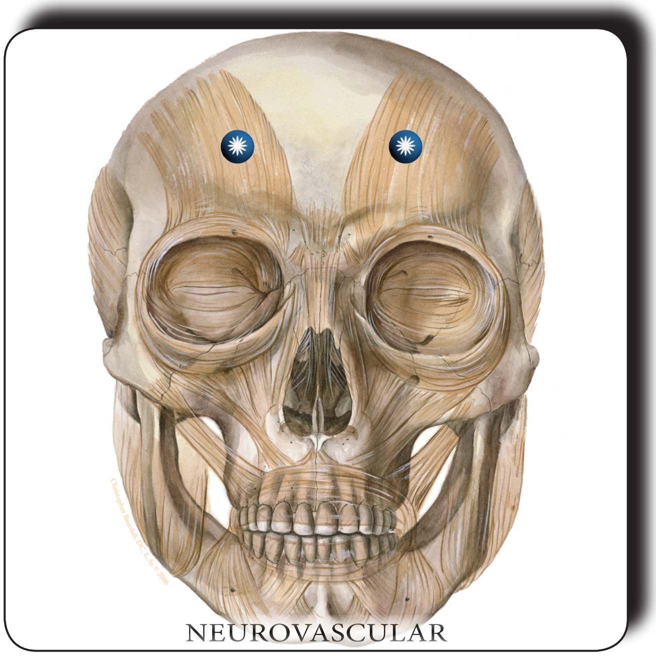
FOOT: First Cuneiform

NUTRIENT SOURCE: Vitamin E

1. Vitamin E (S)
2. Core Vitamin E (N.W.)
3. E100 (N.W.)




FLEXOR DIGITUS PEDIS, FIFTH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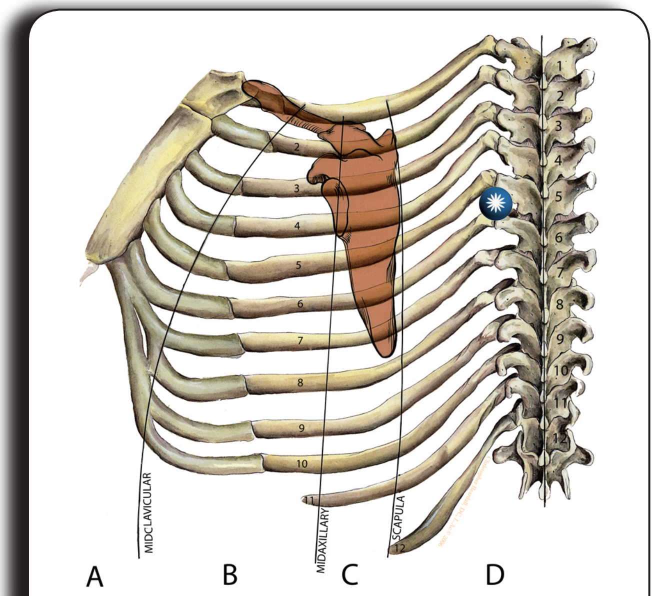
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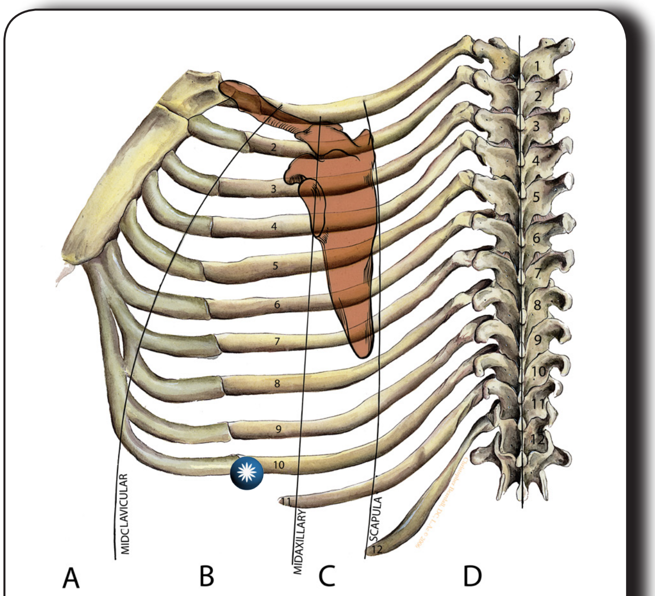
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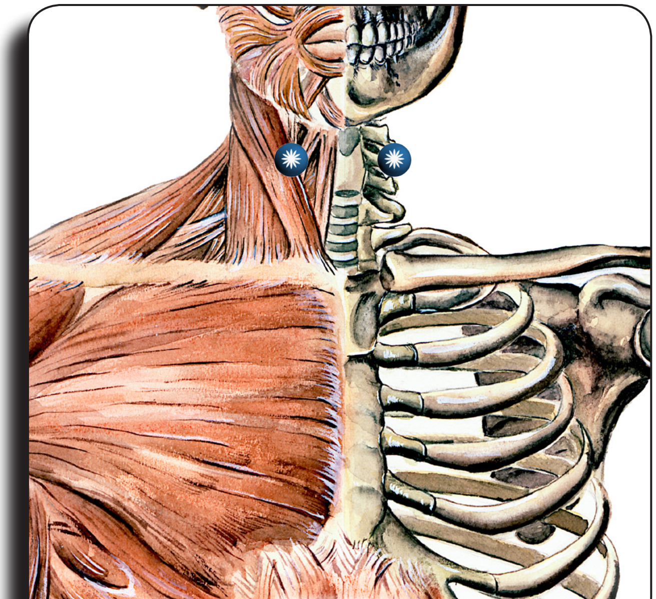
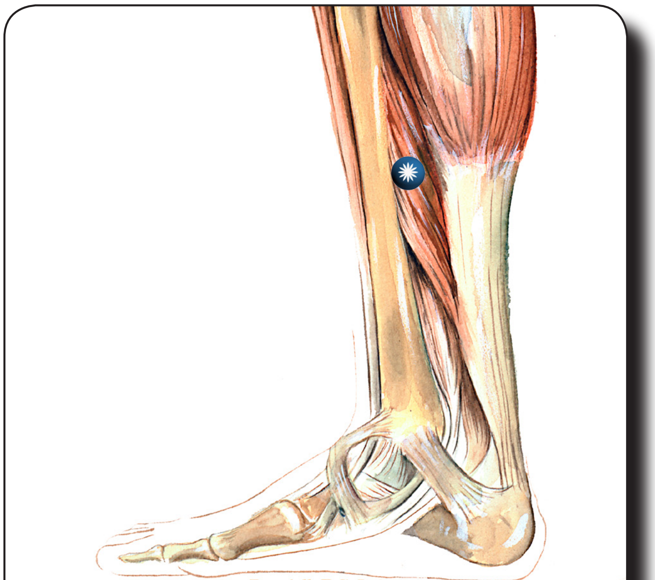
VOR I


VOR II


Christopher Beardall, DC, L.Ac © 2006
MUSCLE ACUPUNCTURE POINT

Muscle 956: FLEXOR DIGITUS PEDIS, Fifth (Lumbricales Pedis, Fourth Division)

ORIGIN: Tendon of flexor digitorum longus at the angle of division.
INSERTION: Dorsal surface of the proximal phalanx of fifth toe, medial side.
ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the fifth toe. Especially active in flexion while toes are in an extended position. (Note illustration.)
TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.
Doctor: Position: End of table facing patient.
Brace: Dorsum of metatarsals.
Contact: Base of proximal phalanx of fifth toe. Support dorsum of toe to maintain middle and distal extension.
Direction: Dorsiflex toe through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, superior and medial to frontal eminence, close to midline.
NEUROLYMPHATIC: (Post/L) Fifth I.C.S., at transverse processes.

VISCERAL ORGAN:

I. *Liver:* (Ant/L) Tip of tenth rib at costal cartilage junction.

II. *Sinuses - Maxillary:* (Ant/BL) C5 transverse process, inferior to S9, medial border of sternocleido-mastoideus.

M. A. P. : Lv 5.5

V.L. : T12 R

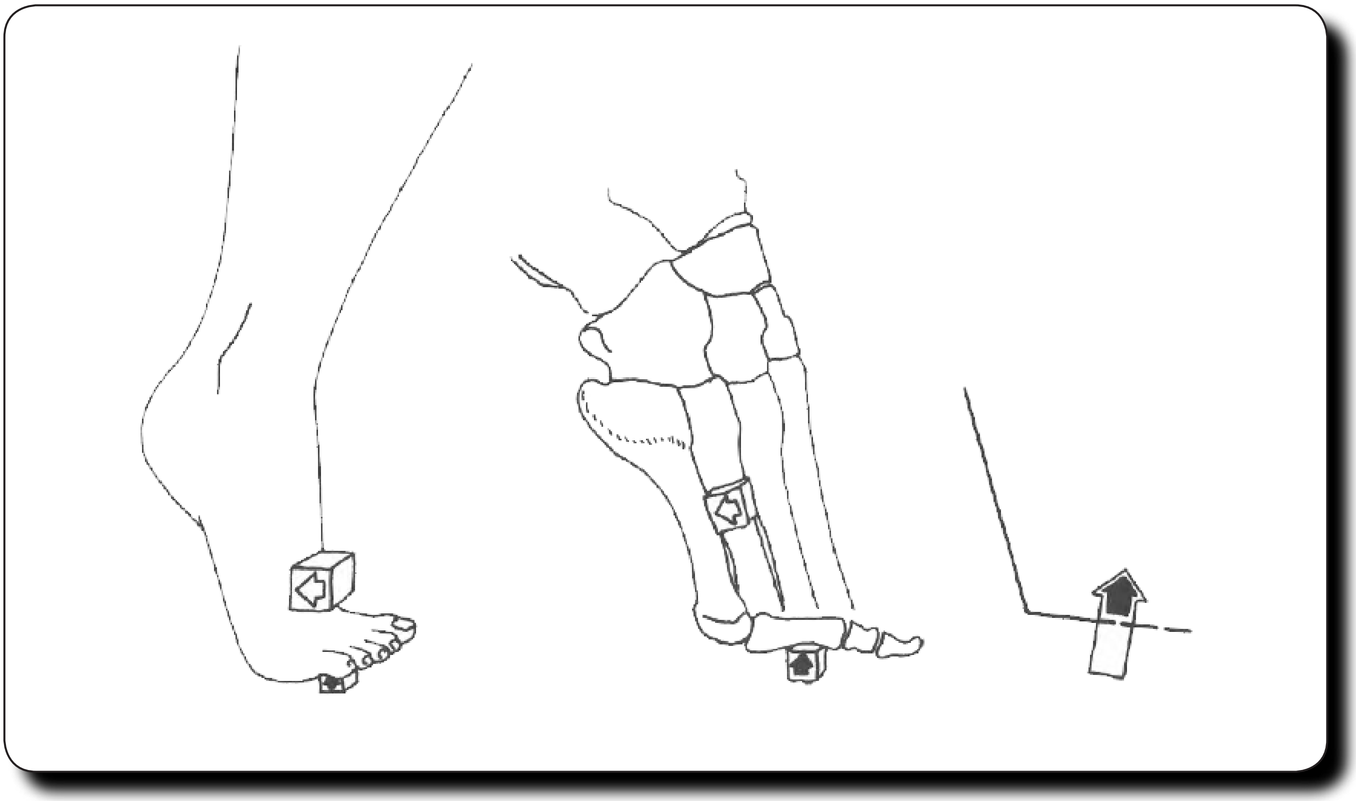
L. B. V.L. : C6 R

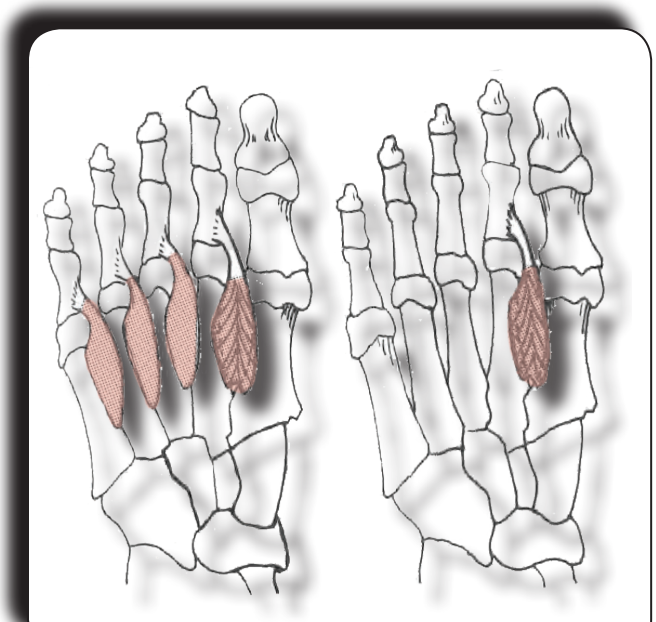
M. M. : S3

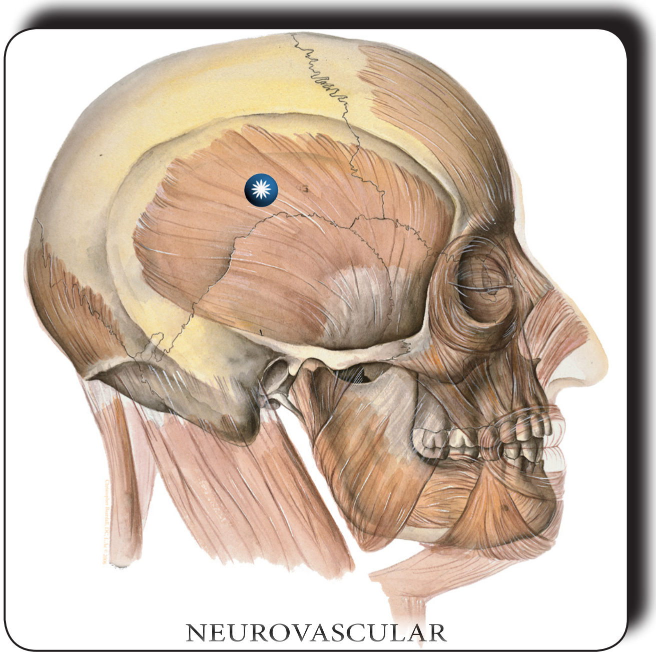
CRANIAL: Mandibular

FOOT: Proximal Phalanx of Great Toe

NUTRIENT SOURCE: Vitamin F
1. Complex F (S)
2. Core Vitamin F (N.W.)
3. F Complex (N.W.)




ADDUCTOR DIGITUS PEDIS, SECOND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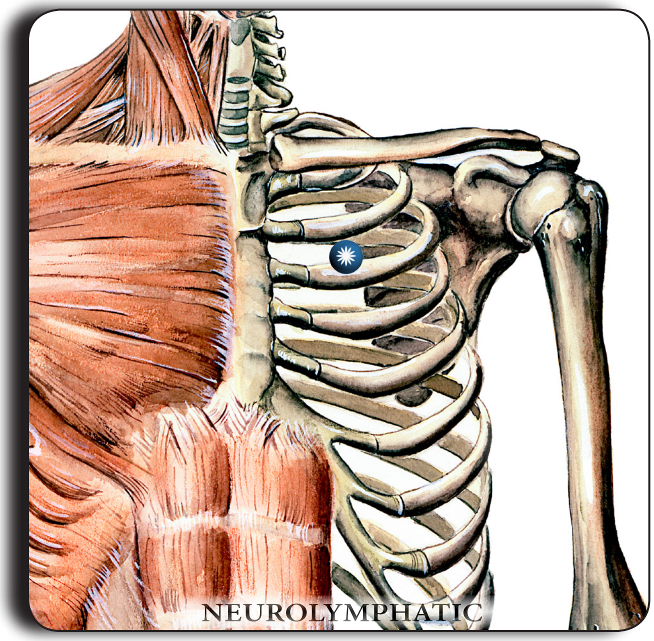
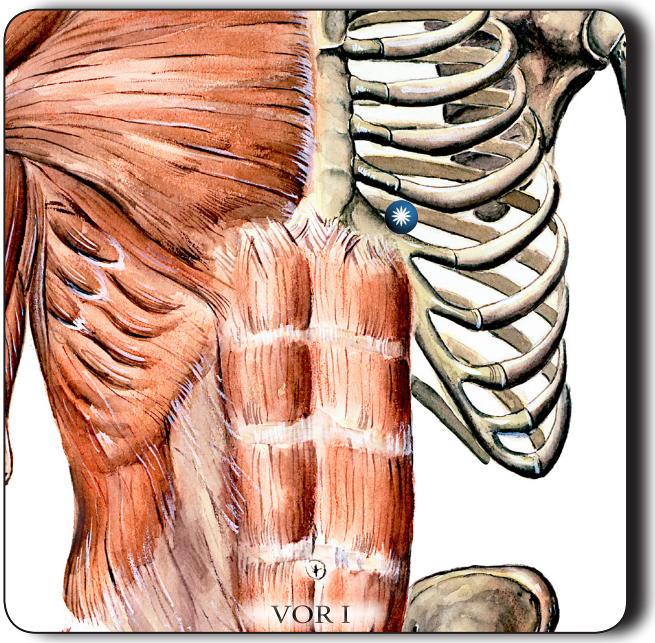
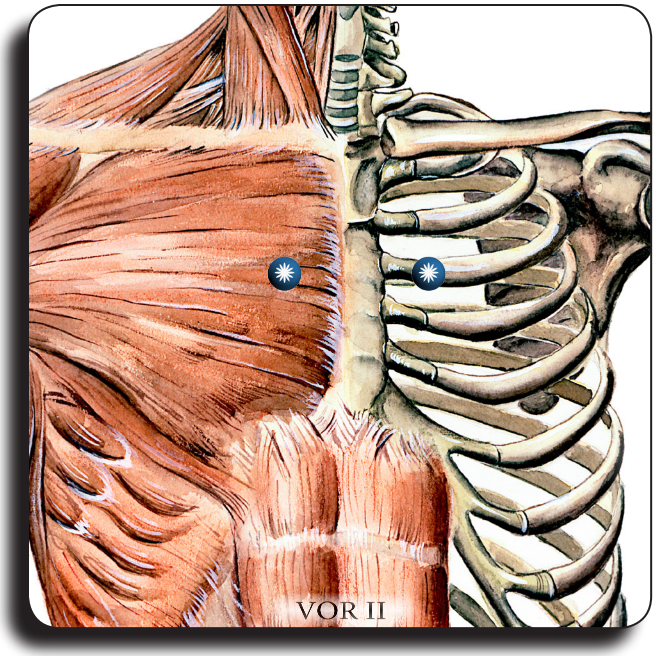
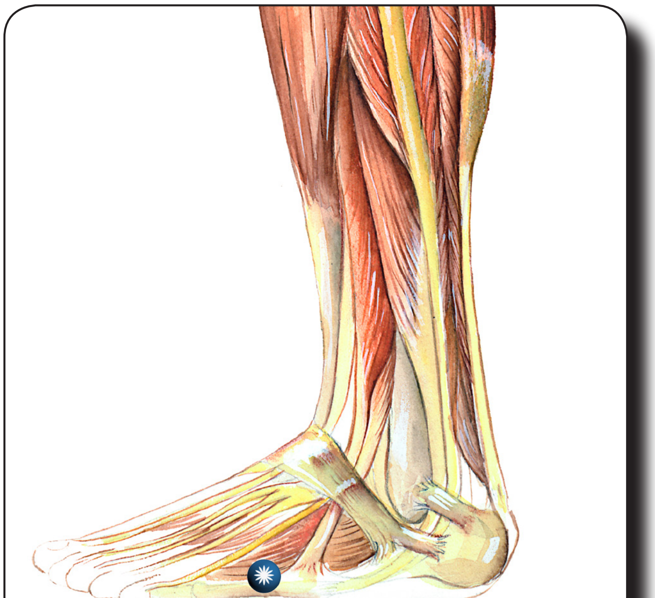

NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 958: ADDUCTOR DIGITUS PEDIS, Second (Interossei Dorsales Pedis, First Division)

ORIGIN: Proximal dorsal surfaces of the first and second metatarsals.

INSERTION: Base of the proximal phalanx of the second toe. Inserts at the medial side.

ACTION: Adducts the proximal phalanx of the second toe toward the mid-sagittal plane.

TEST:

Patient: Position: Supine.
M. T .P. : Adduct and slightly flex the proximal phalanx of the second toe.

Doctor: Position: End of table facing patient.
Brace: Dorsum and lateral aspect of second metatarsal.
Contact: Medial aspect of proximal phalanx of second toe.
Direction: Abduct second toe.

NEUROVASCULAR: (Lat) Parietal bone, 1" superior to squamosal suture, 4" superior, 1"posterior to external auditory canal.

NEUROLYMPHATIC: (Ant/L) Second I.C.S., 2" lateral to sternum.

VISCERAL ORGAN:

I. *Pancreas Duct System:* (Ant/L) K 22, fifth I.C.S., 1" lateral to sternum.

II. *Eye:* (Ant/BL) Third rib, costal cartilage junction, 1" lateral to sternum.

M. A. P. : B 64.5

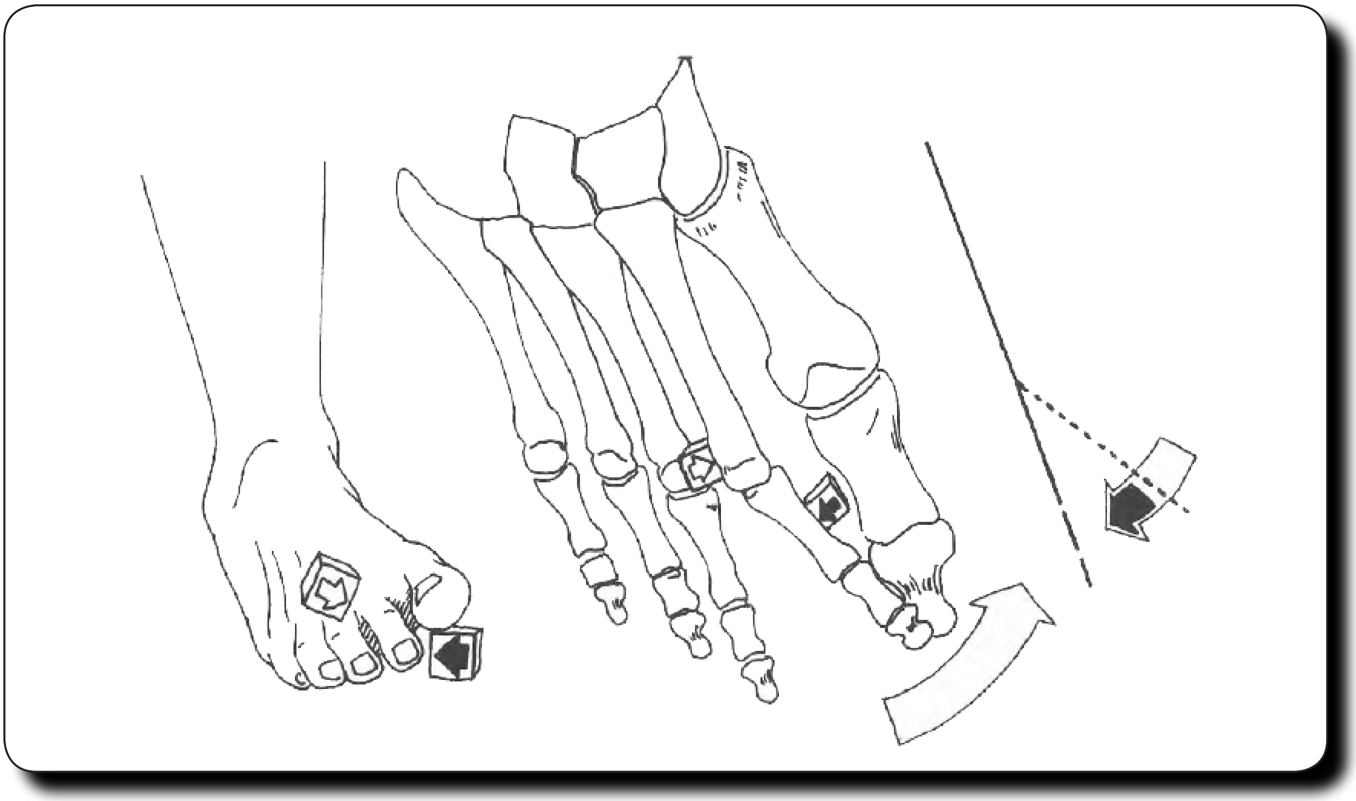
V.L. : L4 R

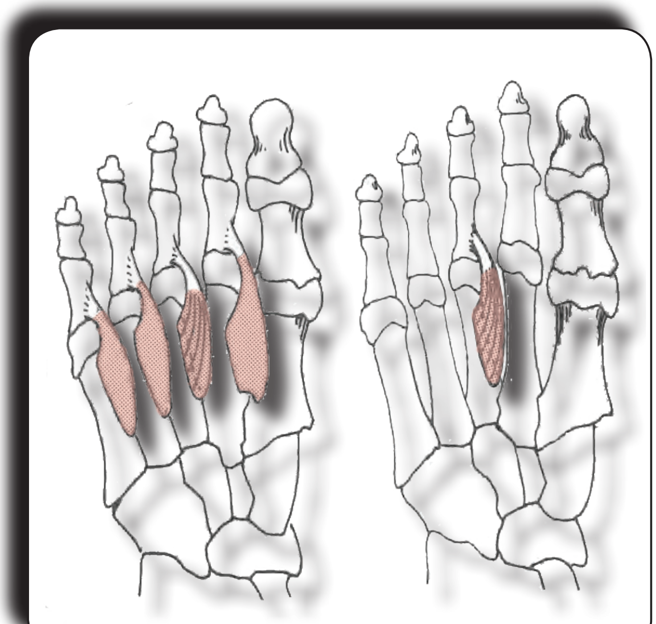
L. B. V.L. : C2 R

M. M. : S2

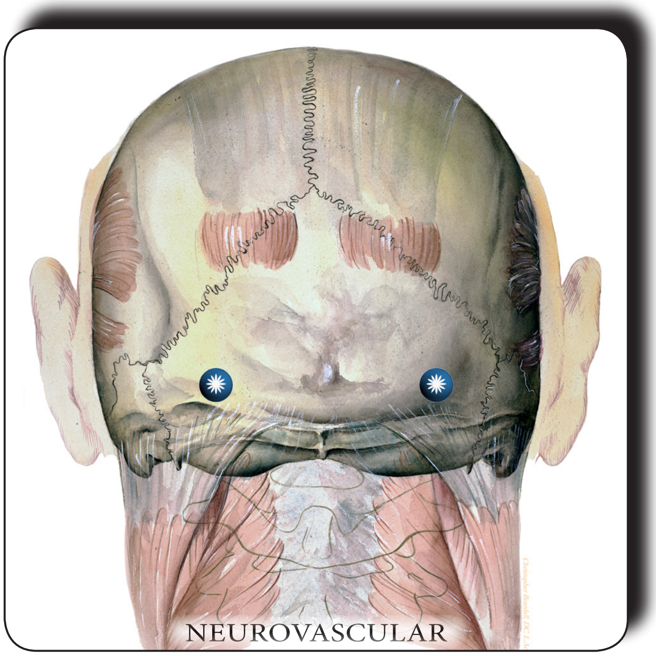
CRANIAL: Occiput

FOOT: Calcaneus
NUTRIENT SOURCE: Zinc
1. Core Zinc (N.W.)
2. Zinc Chelate (N.W.)
3. Chezyn (S)

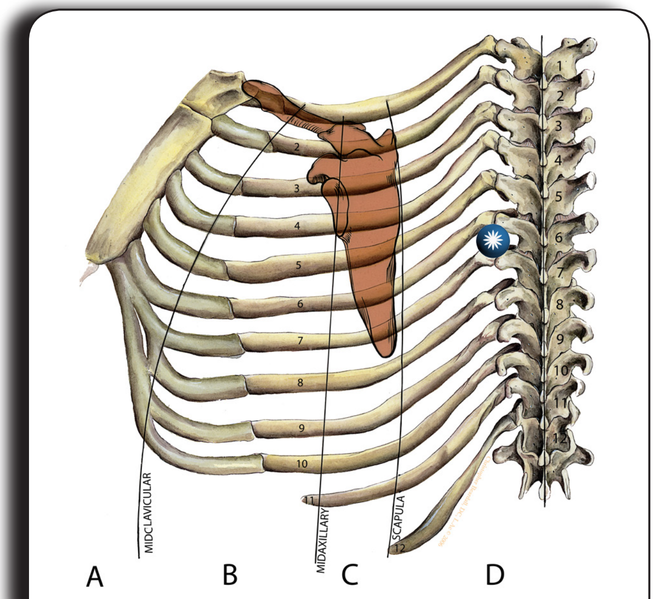




ADDUCTOR DIGITUS PEDIS, THIRD



NEUROVASCULAR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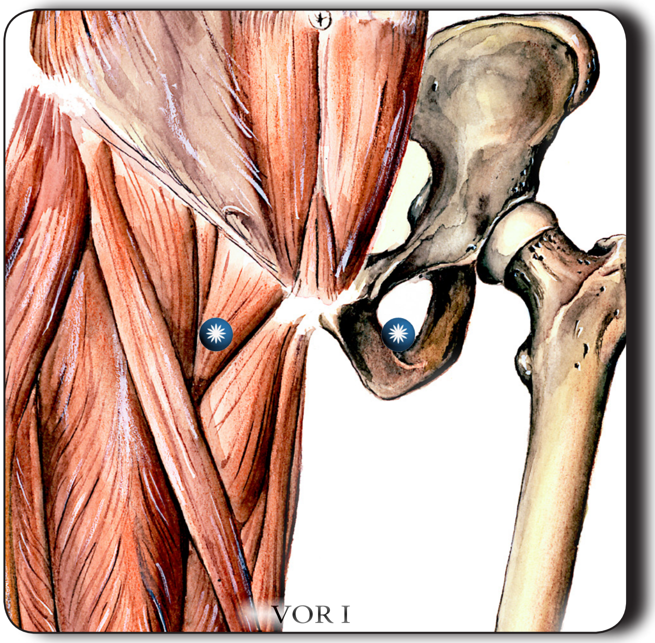
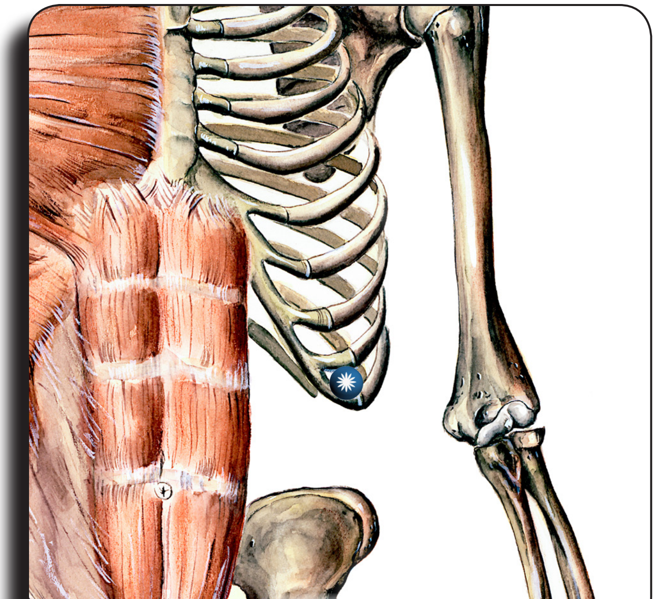
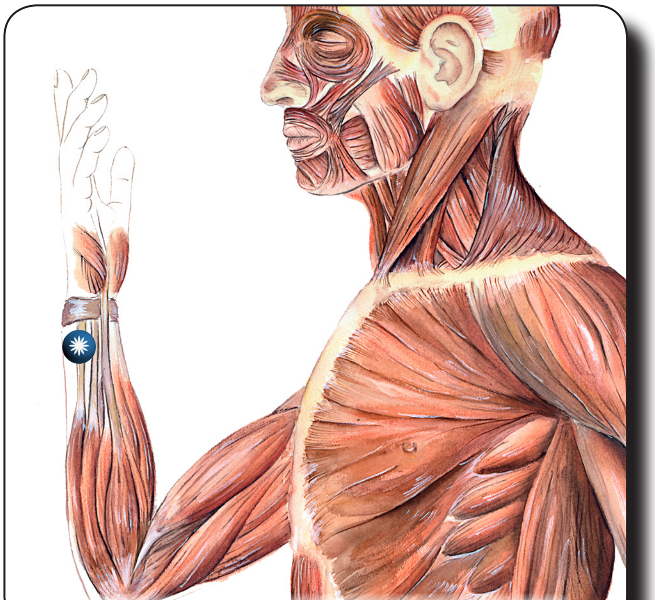
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 960: ADDUCTOR DIGITUS PEDIS, Third (Interossei Plantares, First Division)

ORIGIN: Base and medial side of third metatarsal.

INSERTION: Medial side of the base of proximal phalanx of the third toe.

ACTION: Adducts the proximal phalanx of the third toe toward the mid-sagittal plane.

TEST:

Patient: Position: Supine.
M.T.P.: Adduct and slightly flex the proximal phalanx of the third toe.

Doctor: Position: End of table facing patient.
Brace: Dorsum and lateral aspect of third metatarsal.
Contact: Medial aspect of proximal phalanx of third toe.
Direction: Abduct third toe.

NEUROVASCULAR: (Post/BL) Occipital bone, 1” inferior and 2” lateral to external occipital protuberance.

NEUROLYMPHATIC: (Post/L) Sixth I.C.S., 1” lateral to spine.

VISCERAL ORGAN:

I. *Bladder:* (Ant/BL) Lower rim of obturator foramen.

II. *Spleen:* (Ant/L) Ninth I.C.S., at costal cartilage junction.

M. A. P. : Si 6 1/2

V.L. : T6 R

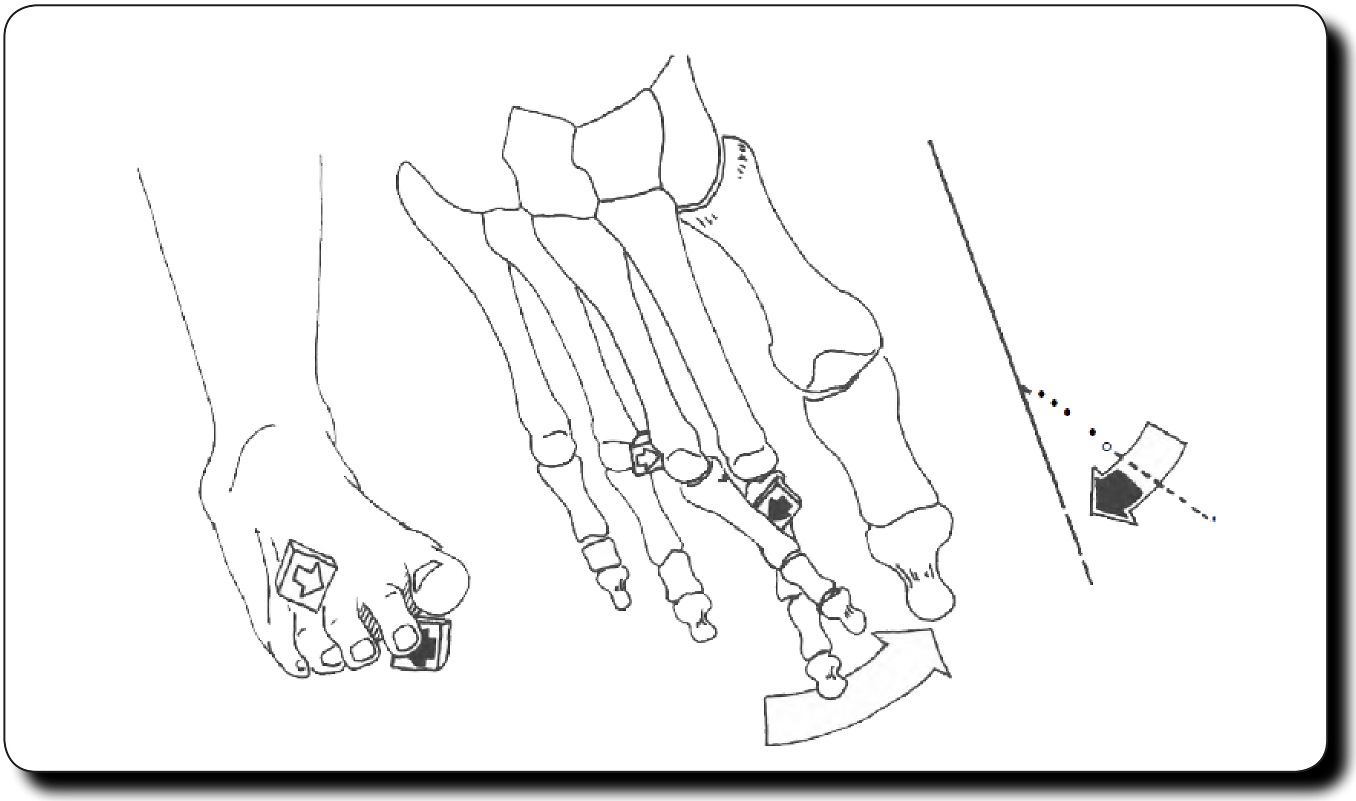
L. B. V.L. : T5 R

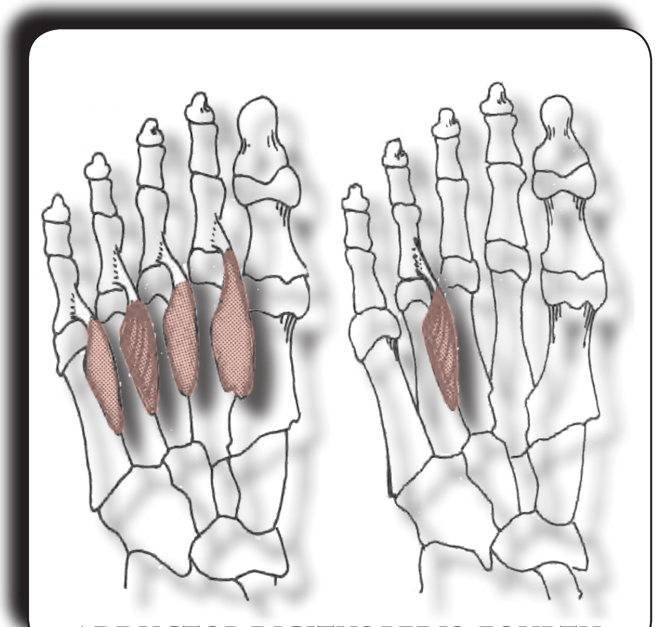
M. M. : S3

CRANIAL: In Research

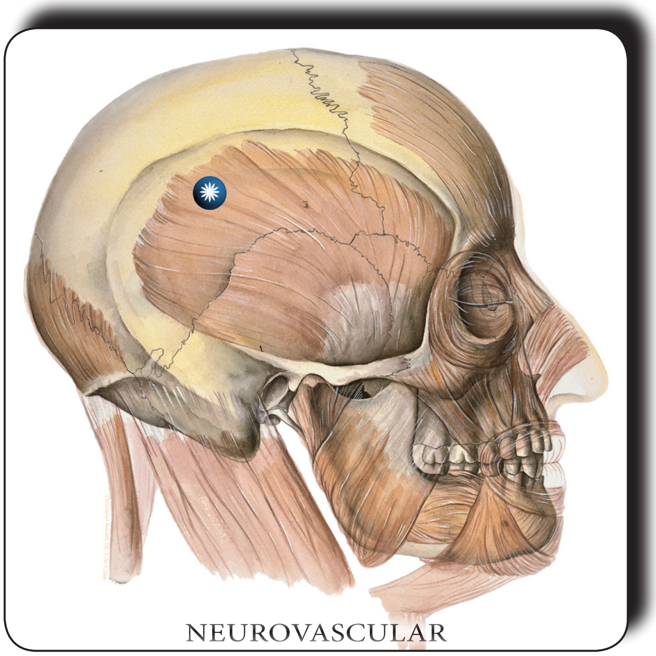
FOOT: In Research

NUTRIENT SOURCE: Iodine
1. Iodomere (S)
2. Core Iodine (N.W.)

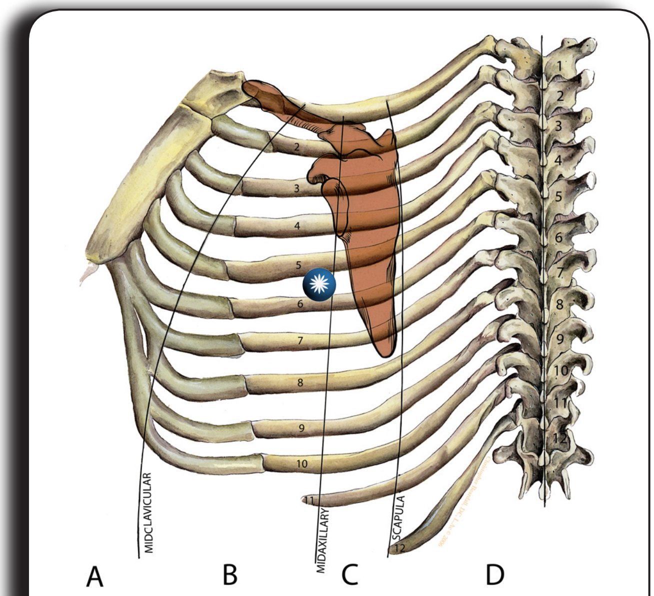




ADDUCTOR DIGITUS PEDIS, FOURTH



NEUROVASCULAR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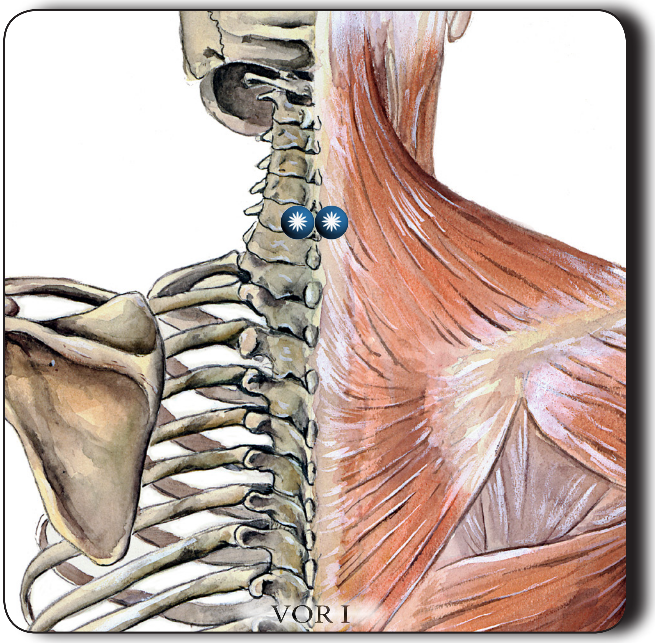
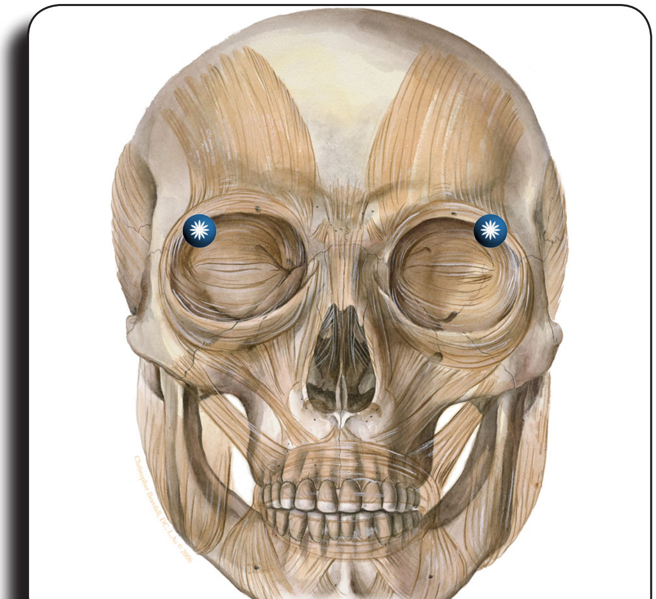
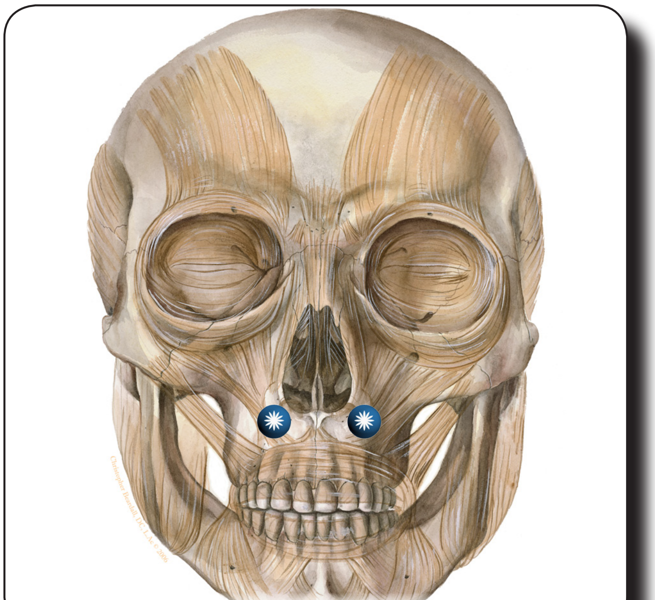
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 962: ADDUCTOR DIGITUS PEDIS, Fourth (Interossei Plantares, Second Division)

ORIGIN: Base and medial side of the fourth metatarsal.

INSERTION: Medial side of the base of the proximal phalanx of the fourth toe.

ACTION: Adducts the proximal phalanx of the fourth toe toward mid-sagittal plane.

TEST:

Patient: Position: Supine.
M.T.P.: Adduct and slightly flex the proximal, phalanx of the fourth toe.

Doctor: Position: End of table facing patient.
Brace: Dorsum and lateral aspectof fourth metatarsal.
Contact: Medial aspect of proximal phalanx of fourth toe.
Direction: Abduct fourth toe.

NEUROVASCULAR: (Lat) Parietal bone, 4" superior and 1" posterior to external auditory canal.
NEUROLYMPHATIC: (Ant/L) Fifth I.C.S., 6" lateral to sternum.

VISCERAL ORGAN:

I. *Salivary Gland - Submandibular:* (Post/BL) C6, just lateral to spinous process.

II. *Eyes:* (Ant /BL) Superior oblique corner of the eye.

M. A. P. : Li 20

V.L. : T9 L

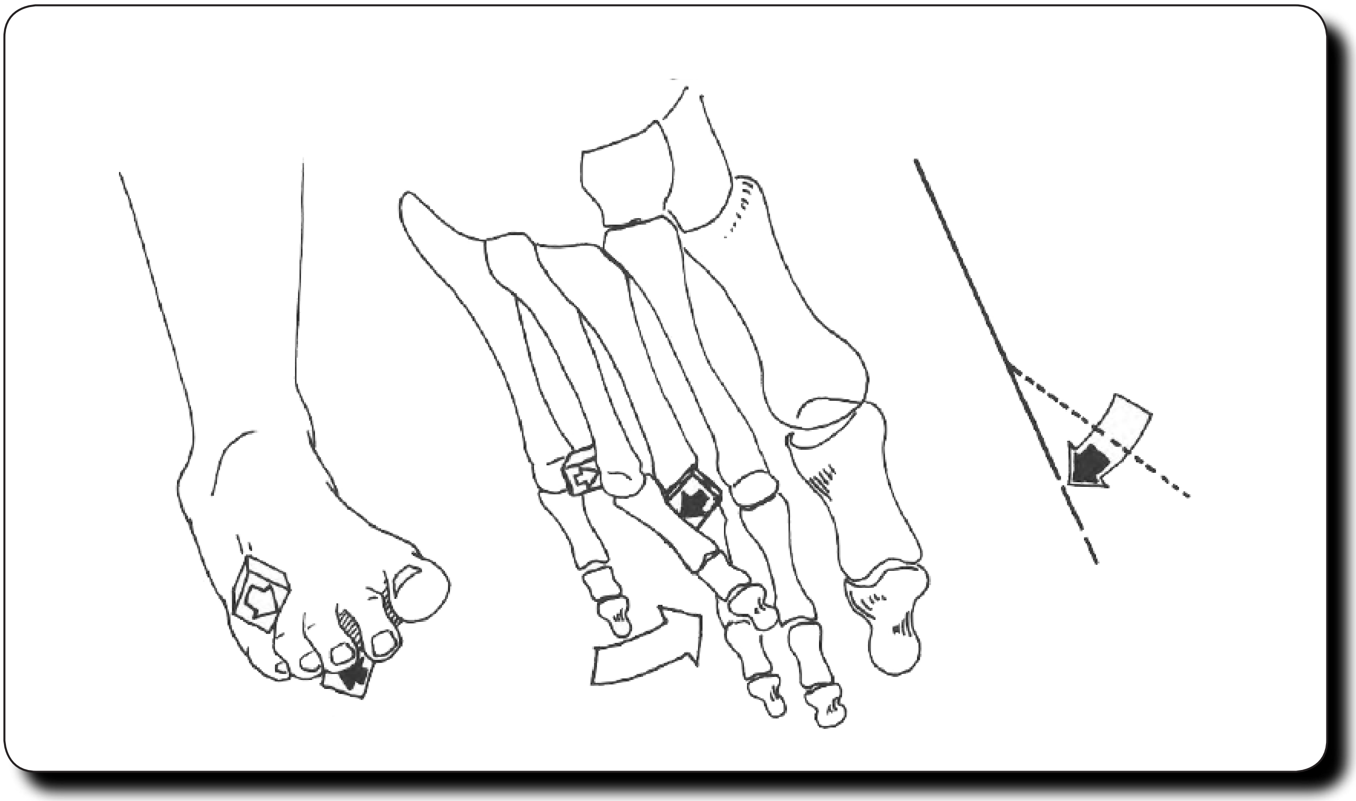
L. B. V.L. : T2 L

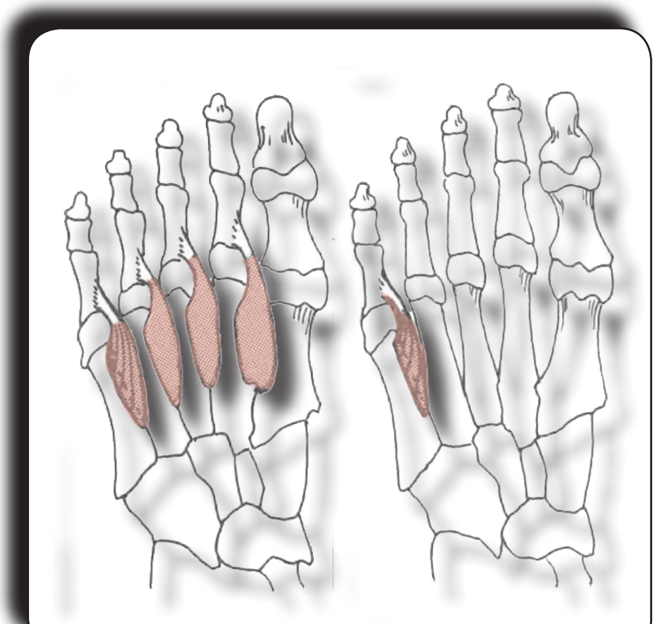
M. M. : S3

CRANIAL: Styloid

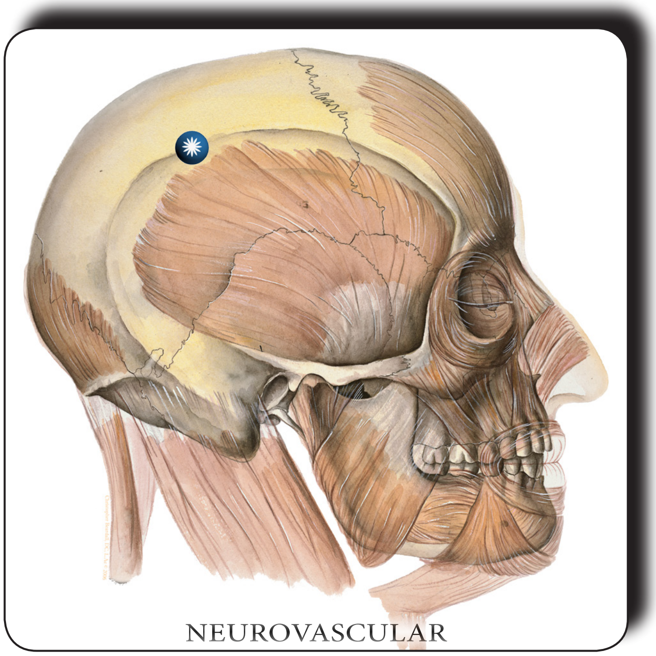
FOOT: Second Phalanx of Great Toe

NUTRIENT SOURCE: Potassium
1. Core Potassium (N.W.)
2. Aspartic K (N.W.)
3. Organic Minerals (S)

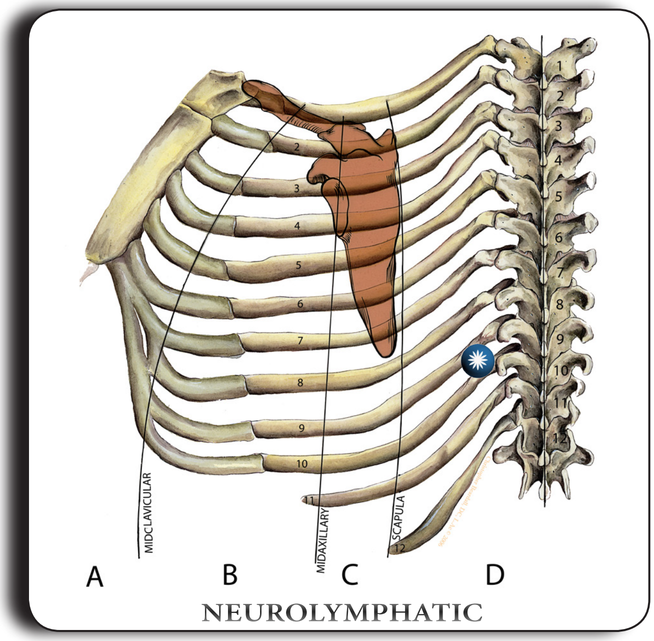




ADDUCTOR DIGITUS PEDIS, FIFTH



NEUROVASCULAR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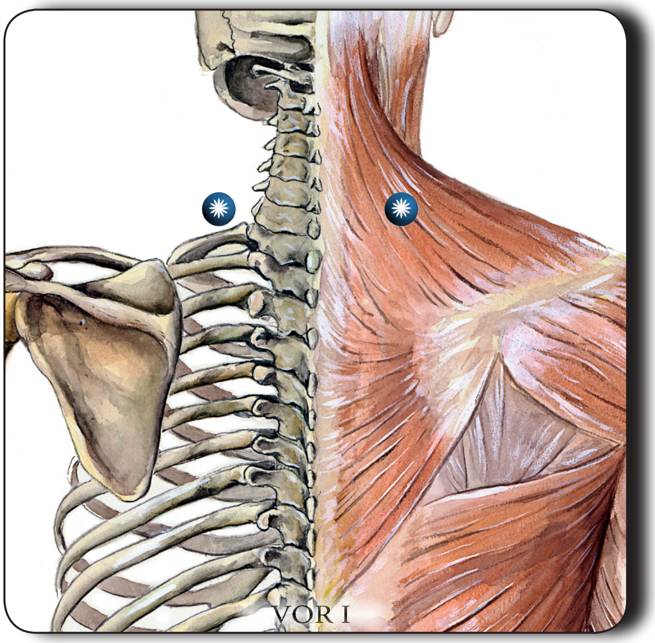
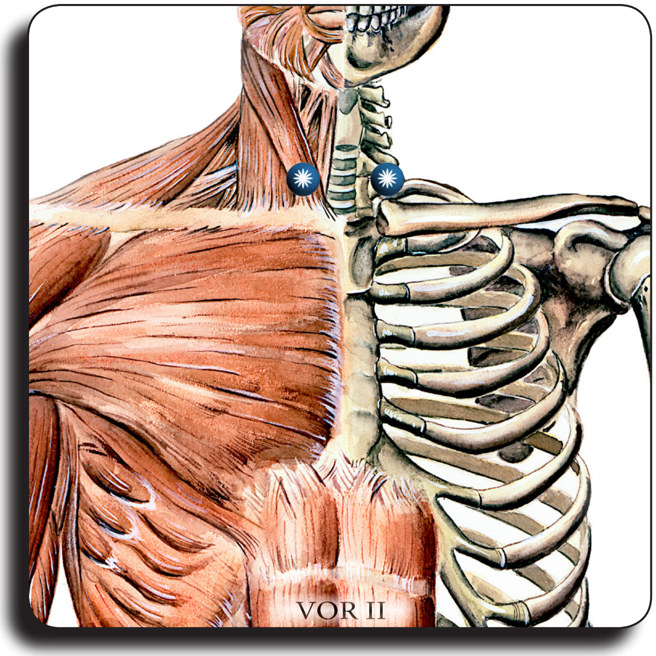


VOR I



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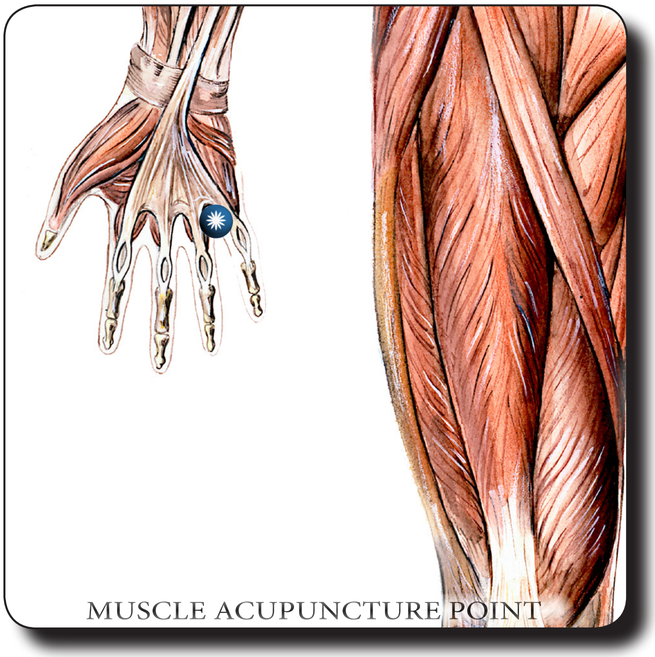


MUSCLE ACUPUNCTURE POINT

Muscle 964: ADDUCTOR DIGITUS PEDIS, Fifth (Interossei Plantares, Third Division)

ORIGIN: Base and medial side of the fifth metatarsal.

INSERTION: Medial side of the base of the proximal phalanx of the fifth toe.

ACTION: Adducts the proximal phalanx of the fifth toe toward mid-sagittal plane.

TEST:

Patient: Position: Supine.
M.T.P.: Adduct and slightly flex the proximal phalanx of the fifth toe.

Doctor: Position: End of table facing patient.
Brace: Dorsum and lateral aspect of the fifth metatarsal.
Contact: Medial aspect of the proximal phalanx of the fifth toe.
Direction: Abduct fifth toe.

NEUROVASCULAR: (Lat) Parietal bone, superior to superior temporal line, 5" superior and 2" posterior to external auditory canal.

NEUROLYMPHATIC: (Post/L) Ninth I.C.S., 2" lateral to transverse processes.

VISCERAL ORGAN:

I. *Sinuses - Nasal:* (Post/BL) C7,2" lateral to spinous process, in belly of upper trapezius.

II. *Tonsils:* (Ant/BL) Base of sternocleidomastoideus muscle, 1" superior to origin.

M. A. P. : H 8.4

V.L. : T8 R

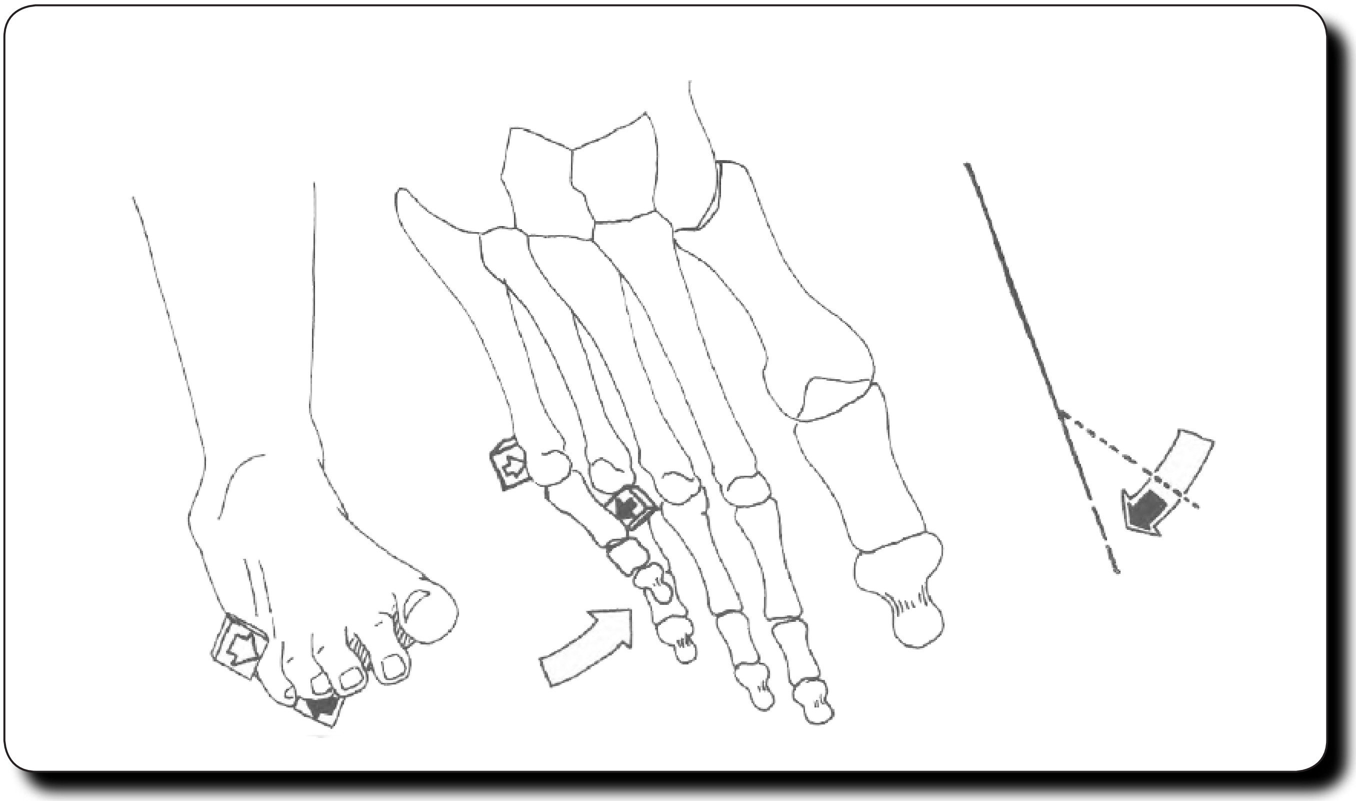
L. B. V.L. : T3 R

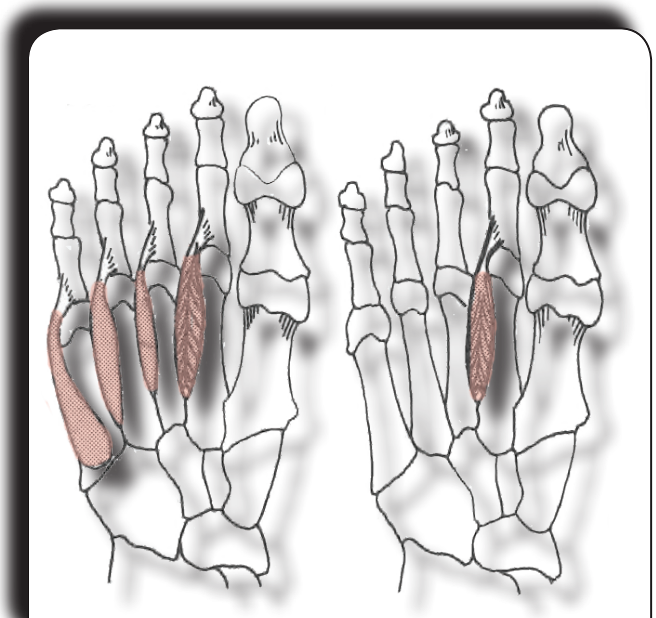
M. M. : S3

CRANIAL: Temporal

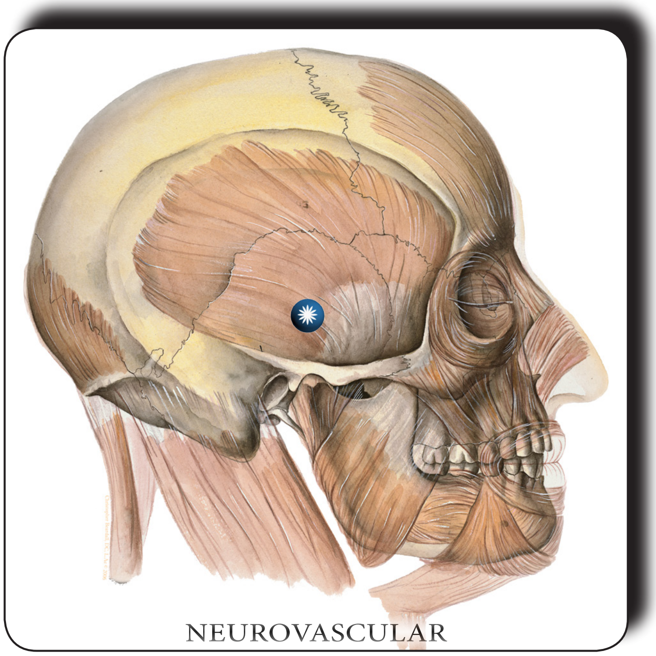
FOOT: Cuboid

NUTRIENT SOURCE: Vitamin A
1. Vitamin A (S)
2. Core Vitamin A (N.W.)





ABDUCTOR DIGITUS PEDIS, SECOND



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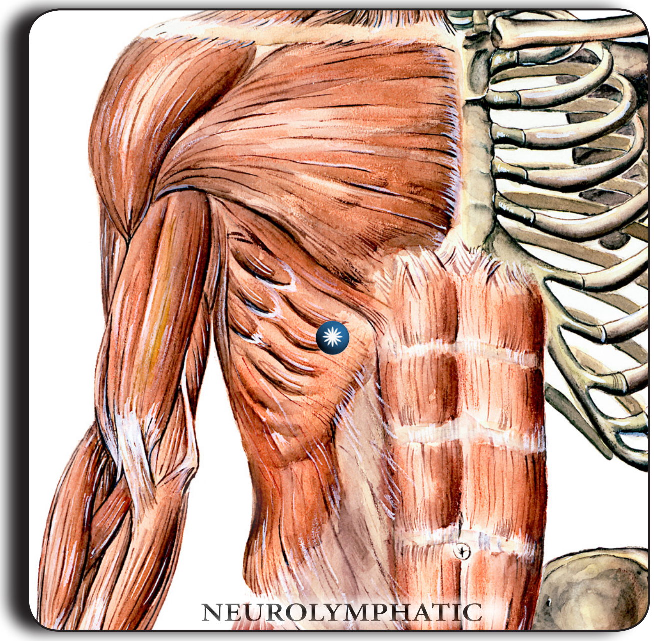

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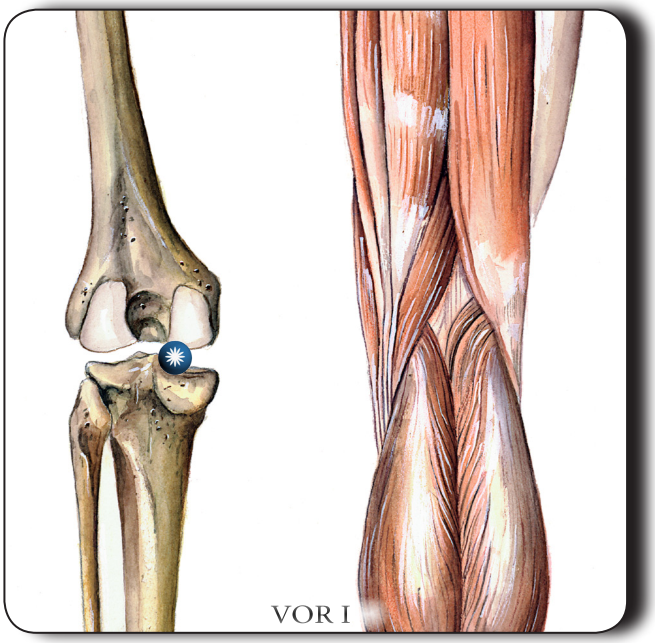
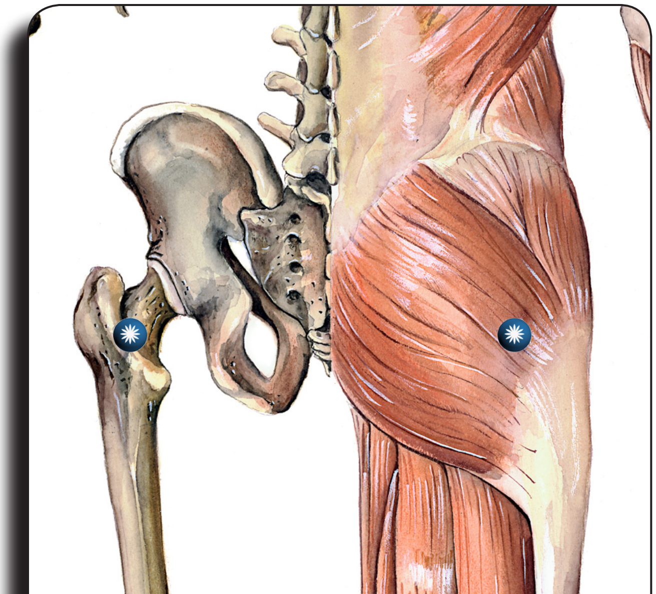


VOR I



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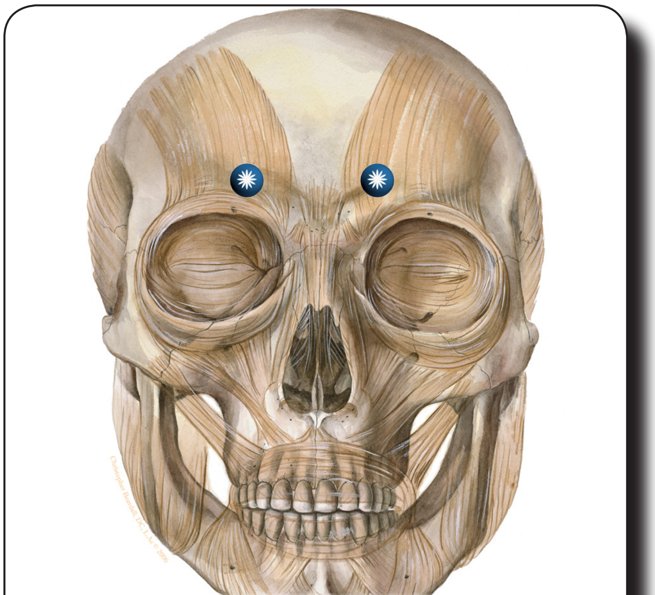


MUSCLE ACUPUNCTURE POINT

Muscle 966: ABDUCTOR DIGITUS PEDIS, Second (Interossei Dorsales Pedis, Second Division)

ORIGIN: Dorsal surface between second and third metatarsal.

INSERTION: Base and lateral aspect of proximal phalanx of the second toe and onto the tendon of extensor digitorum longus.

ACTION: Abducts the proximal phalanx of the second toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.
M.T.P.: Abduct and slightly flex the proximal phalanx of the second toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and medial aspect of second metatarsal.
Contact: Lateral aspect of proximal phalanx of second toe.
Direction: Adduct second toe.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, 1” superior and 1” anterior to ear.

NEUROLYMPHATIC: (Ant/R) Seventh I.C.S., at the costal cartilage junction.

VISCERAL ORGAN:

I. *Spleen:* (Post/L) Back of knee, medial to B 54.

II. *Thymus:* (Post/BL) On femur, just superior to insertion of quadratus femoris on the intertrochanteric crest.

M. A. P. : B 2 1/4

V.L. : T7 L

L. B. V.L. : T4 L

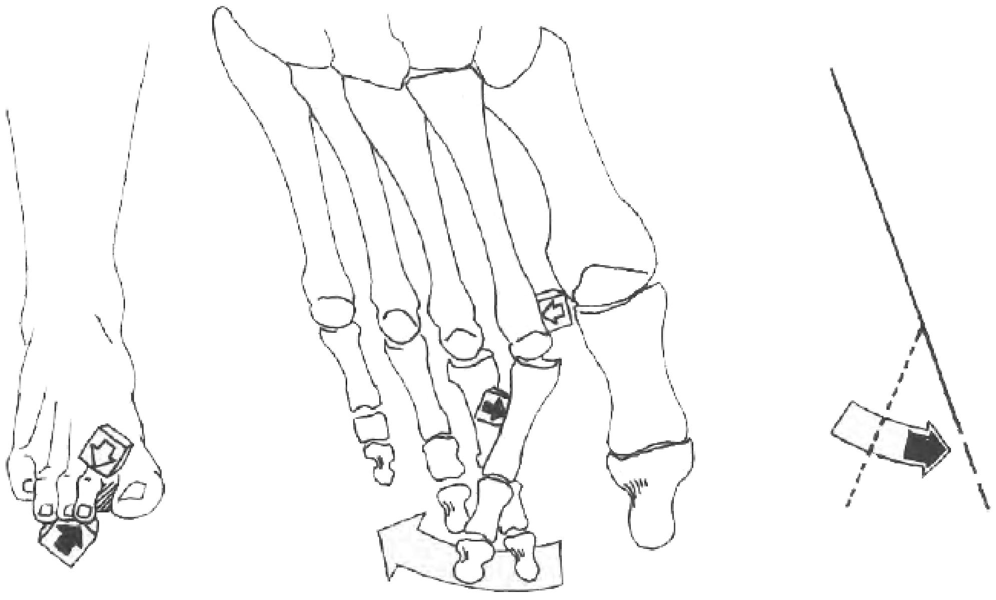
M. M. : S3

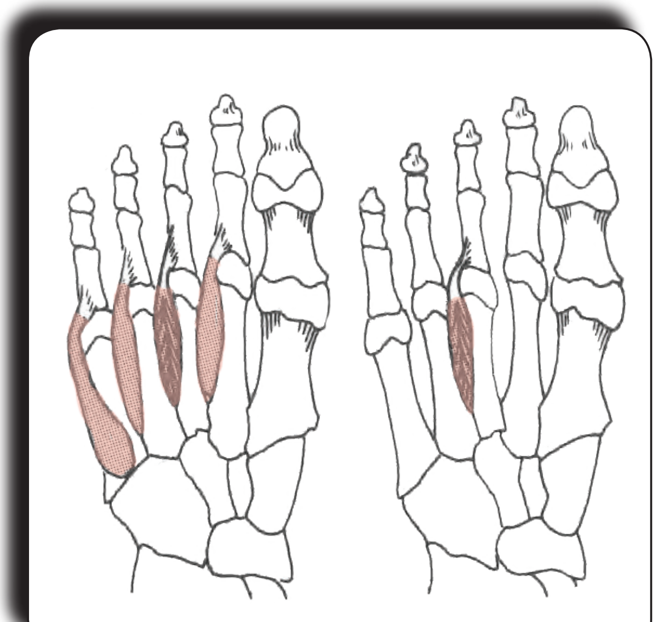
CRANIAL: Vomer

FOOT: Second Metatarsal

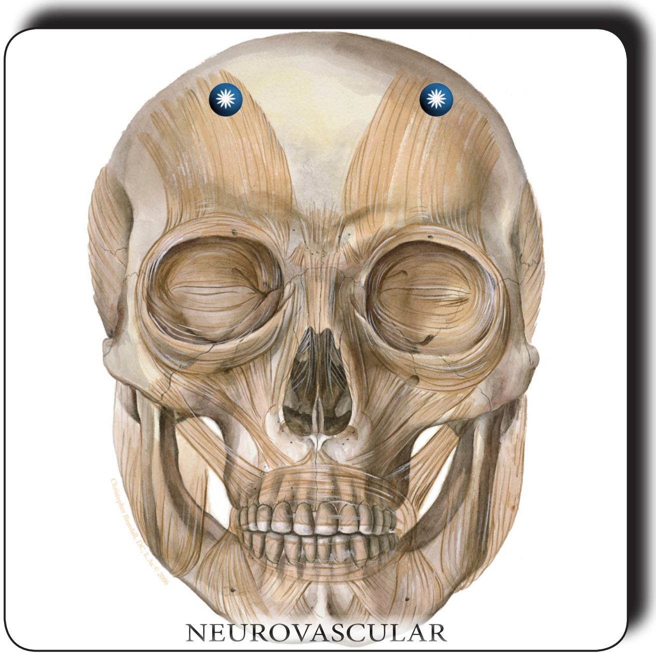
NUTRIENT SOURCE: Iron

1. Core Iron (N.W.)
2. Ferrofood (S)





ABDUCTOR DIGITUS PEDIS, THIRD



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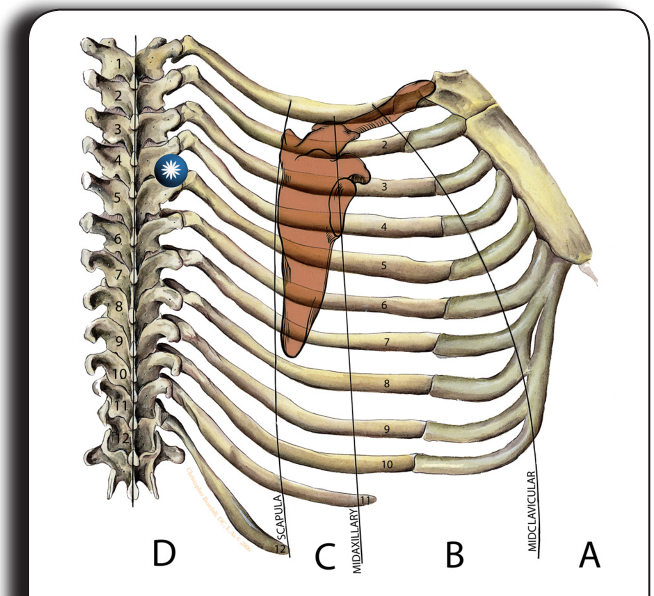
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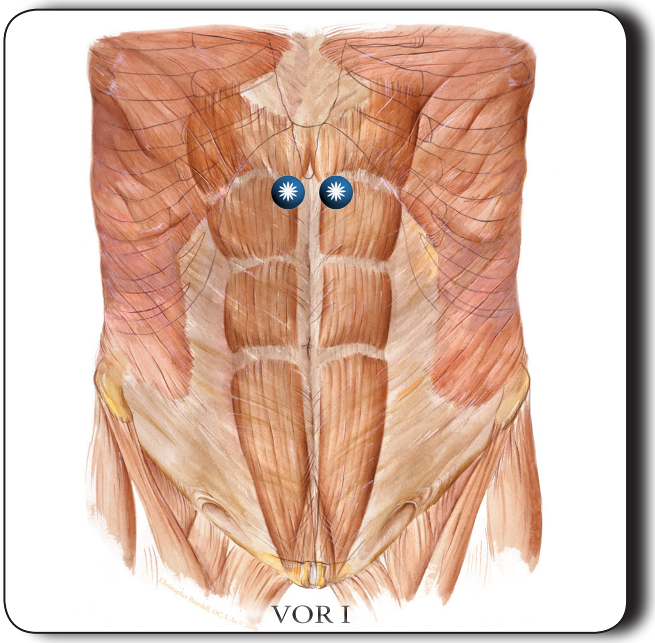

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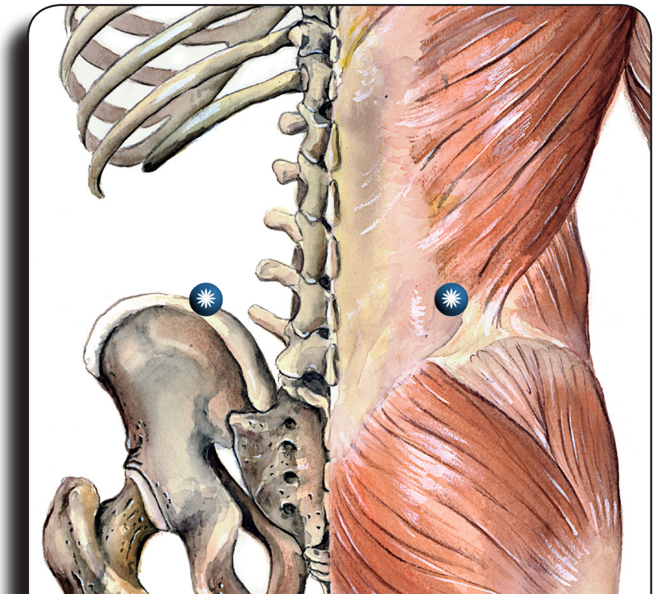
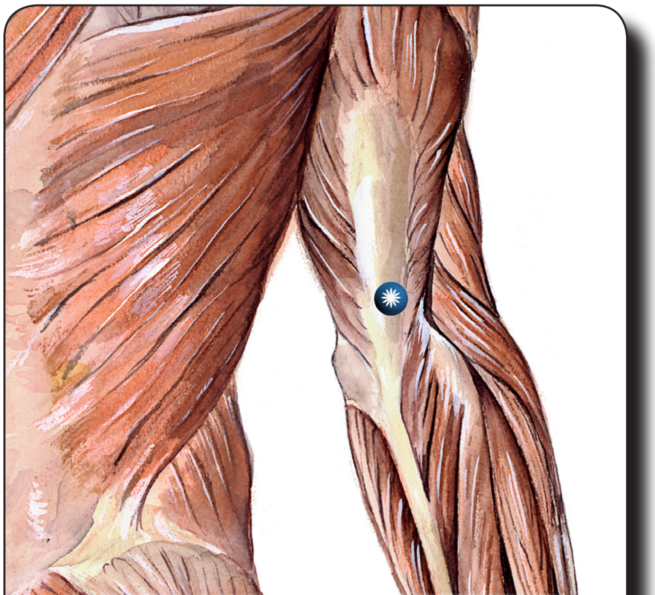


VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 968: ABDUCTOR DIGITUS PEDIS, Third (Interossei Dorsales Pedis, Third Division)

ORIGIN: Dorsal surface between third and fourth metatarsals.

INSERTION: Base and lateral aspect of the proximal phalanx of the third toe and onto the tendon of extensor digitorum longus.

ACTION: Abducts the proximal phalanx of the third toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.
M.T.P.: Abduct and slightly flex the proximal phalanx of the third toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and medial aspect of the third metatarsal.
Contact: Lateral aspect proximal phalanx of third toe.
Direction: Adduct third toe.

NEUROVASCULAR: (Ant/BL) Frontal bone, at hair line.

NEUROLYMPHATIC: (Post/R) Fourth I.C.S., at the spine.

VISCERAL ORGAN:

I. *Adrenals:* (Ant/BL) Rectus abdominis, third section, near its insertion, 1/2" lateral to linea alba.

II. *Ureter:* (Post/BL) Crest of ilium, origin of quadratus lumborum, 1" lateral to L5 transverse process.

M. A. P. : T 11.2

V.L. : L2 L

L. B. V.L. : C4 L

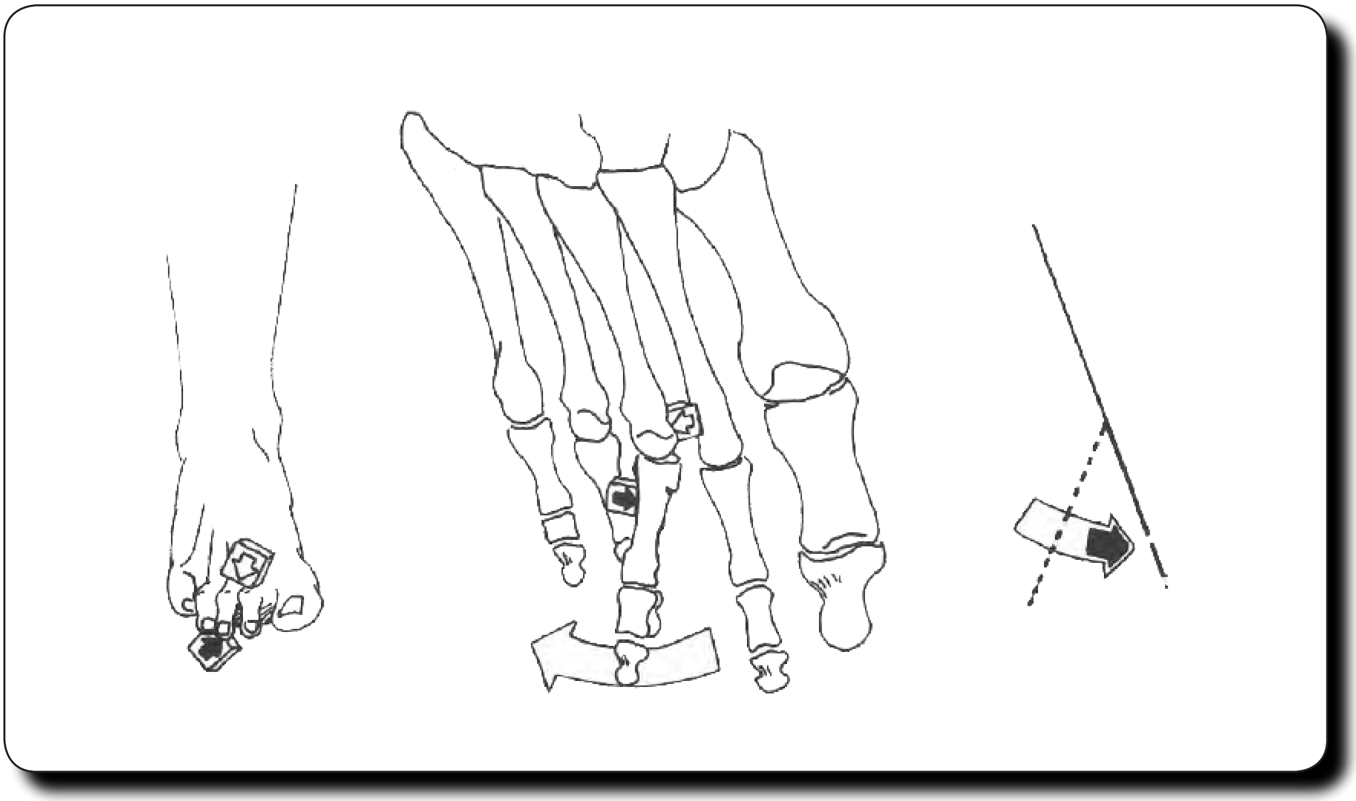
M. M. : S3

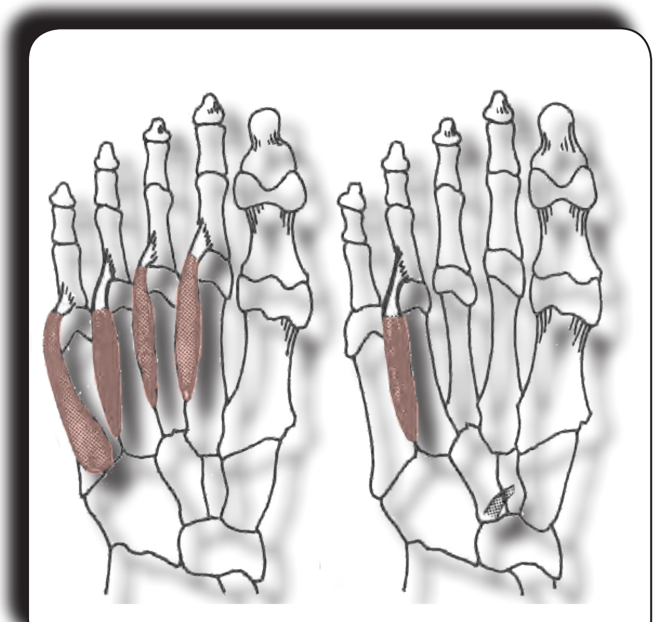
CRANIAL: In Research

FOOT: In Research

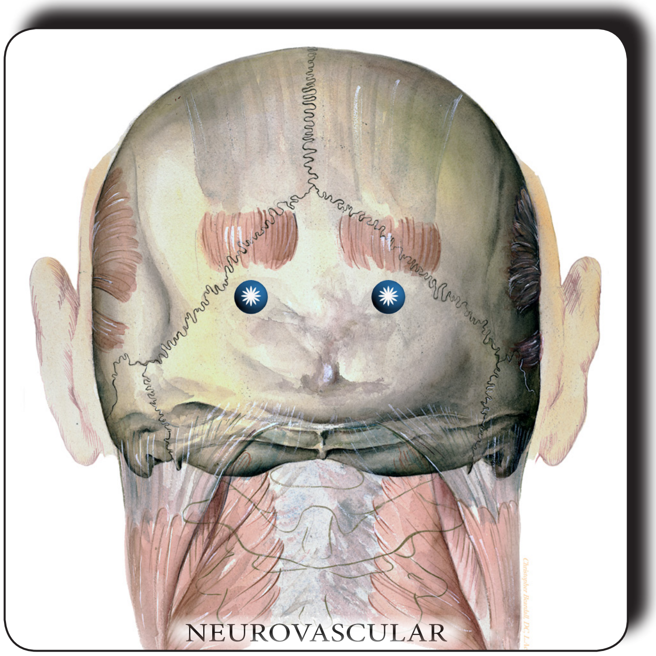
NUTRIENT SOURCE: Pantothenic Acid

1. Core Pantothenic Acid (N.W.)
2. Pantothenic Acid (N.W.)

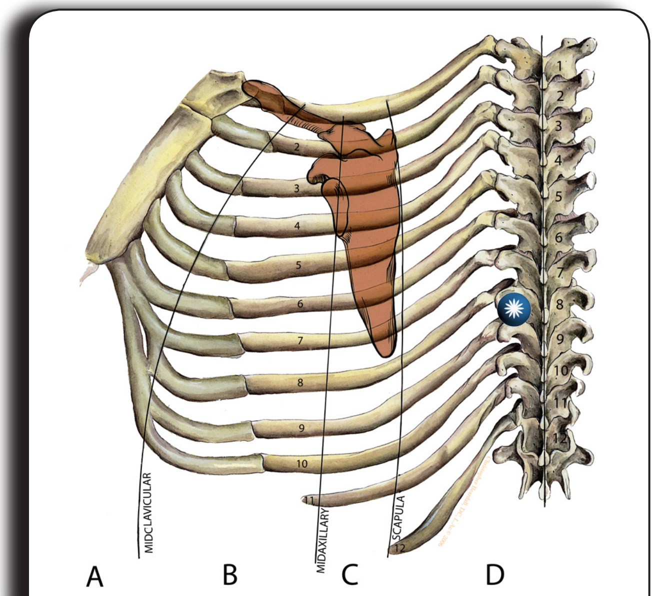




ABDUCTOR DIGITUS PEDIS, FOURTH


Christopher Beardall, DC, L.Ac

NEUROVASCULAR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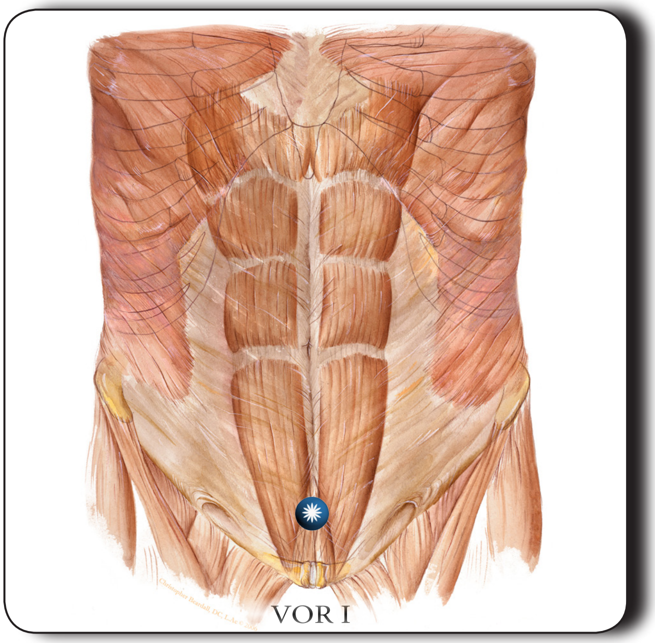
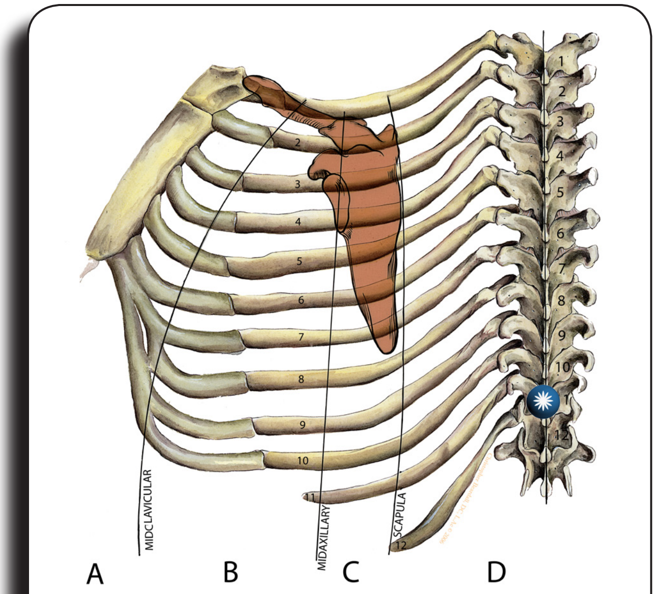
NEUROLYMPHATIC


Christopher Beardall, DC, L.Ac

VOR I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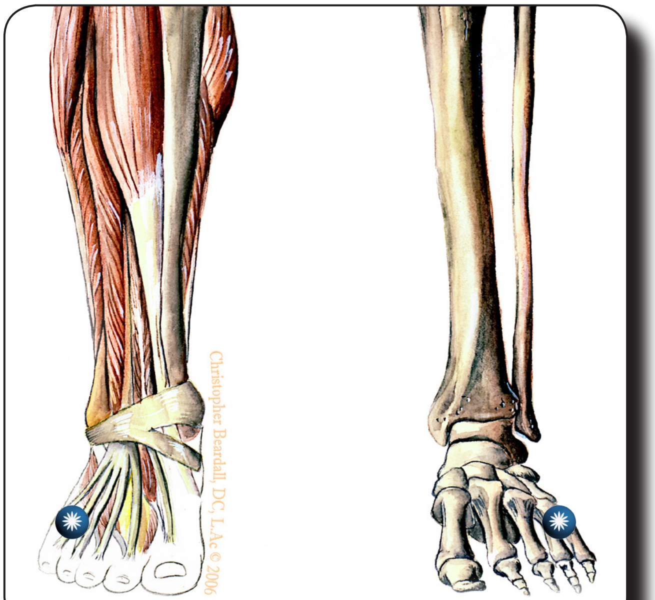
VOR II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MUSCLE ACUPUNCTURE POINT

Muscle 970: ABDUCTOR DIGITUS PEDIS, Fourth (Interossei Dorsales Pedis, Fourth Division)

ORIGIN: Dorsal surface between the fourth and fifth metatarsals.

INSERTION: Base and lateral aspect of the proximal phalanx of the fourth toe and onto the tendon of extensor digitorum longus.

ACTION: Abducts the proximal phalanx of the fourth toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.
M.T.P. Abduct and slightly flex the proximal phalanx of the fourth toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and medial aspect of fourth metatarsal.
Contact: Lateral aspect of proximal phalanx of fourth toe.
Direction: Adduct fourth toe.

NEUROVASCULAR: (Post/BL) Occipital bone, 2” superior and 1” lateral to external occipital protuberance.

NEUROLYMPHATIC: (Post/L) Eighth I.C.S. at spine.

VISCERAL ORGAN:

I. *Prostate/Uterus:* (Ant/Midline) Cv 4.0; 2” superior to pubes.

II. *Thyroid:* (Post/Midline) Gv 7, between spinous processes of T10 and T11.

M. A. P. : G 43.0

V.L. : C4 L

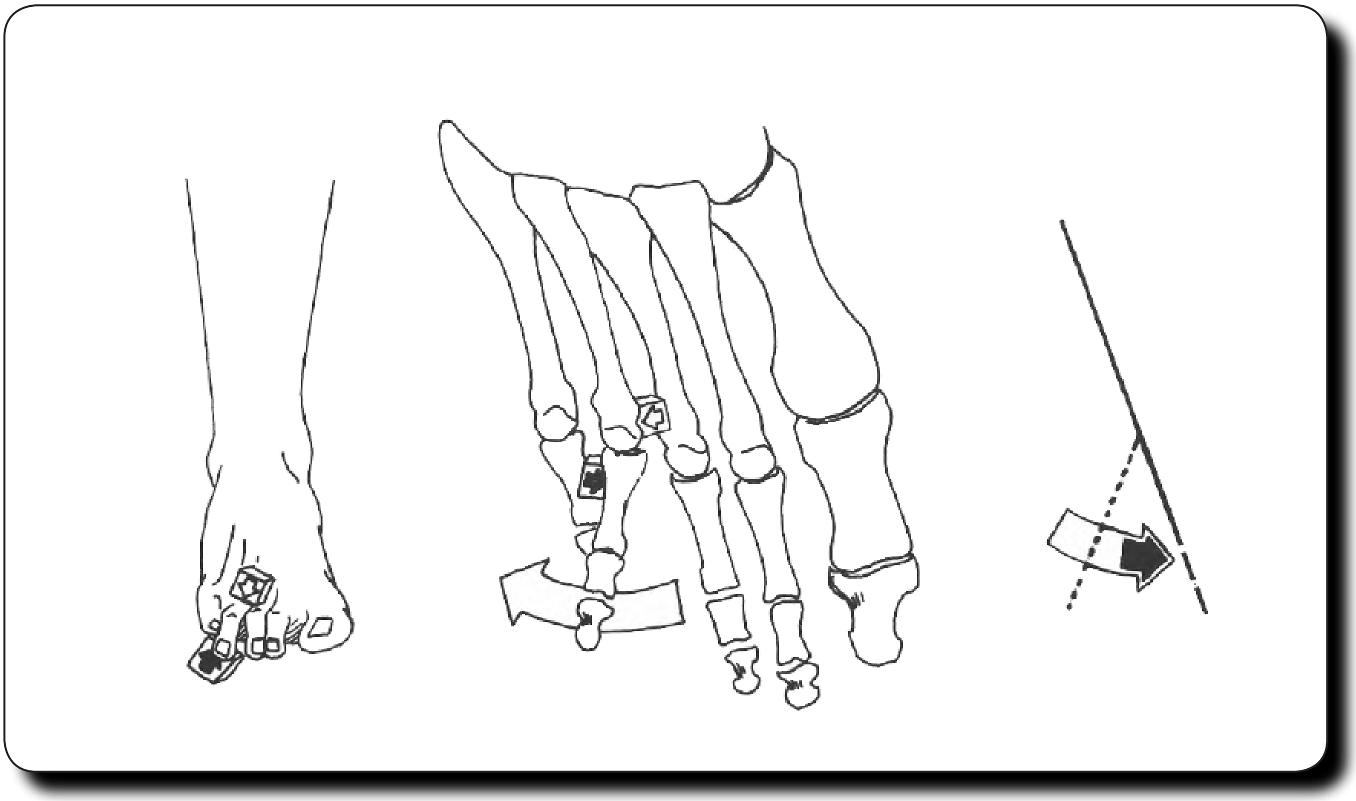
L. B. V.L. : L2 L

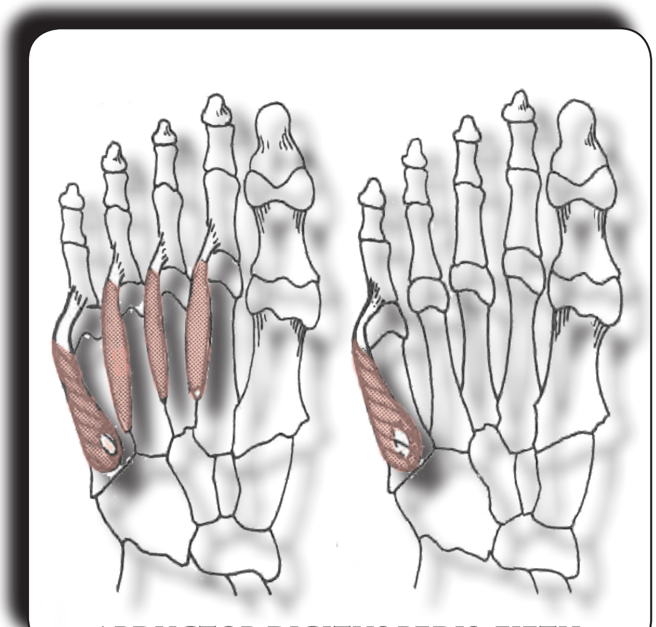
M. M. : S2

CRANIAL: Lacrimal

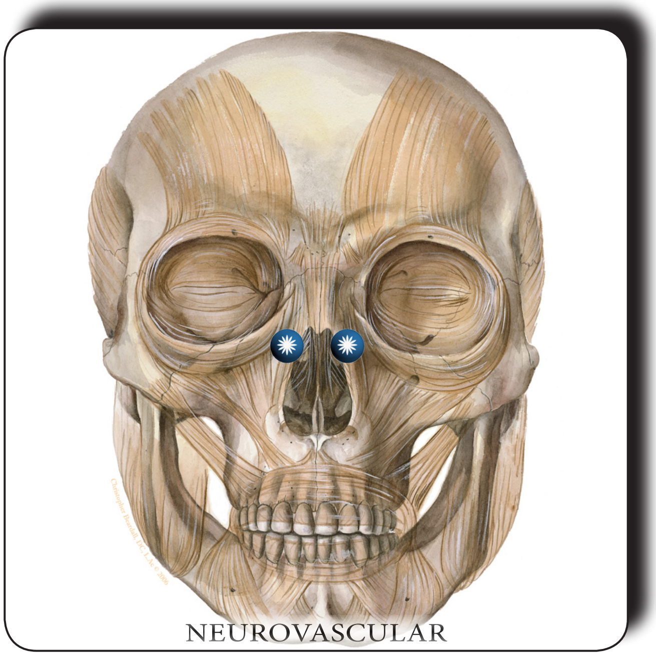
FOOT: Proximal Phalanx of Second Toe

NUTRIENT SOURCE: Manganese
1. Manganese B12 (S)
2. Core Manganese (N.W.)
3. Vita Manganese (N.W.)

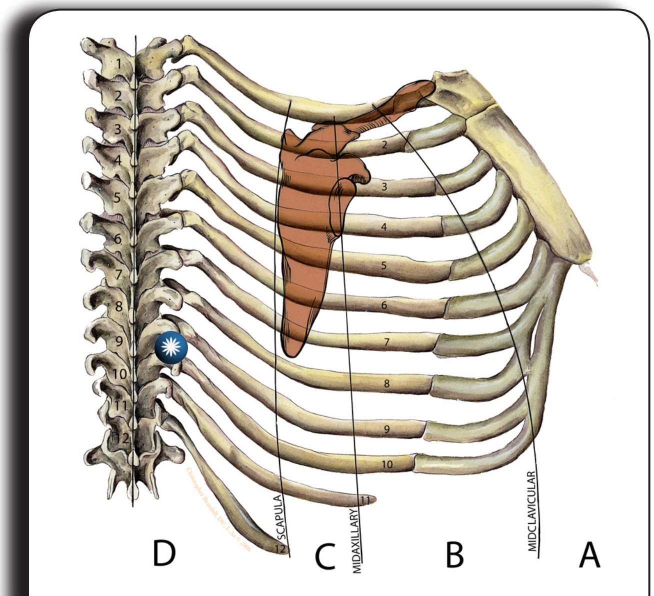




ABDUCTOR DIGITUS PEDIS, FIFTH



NEUROVASCULAR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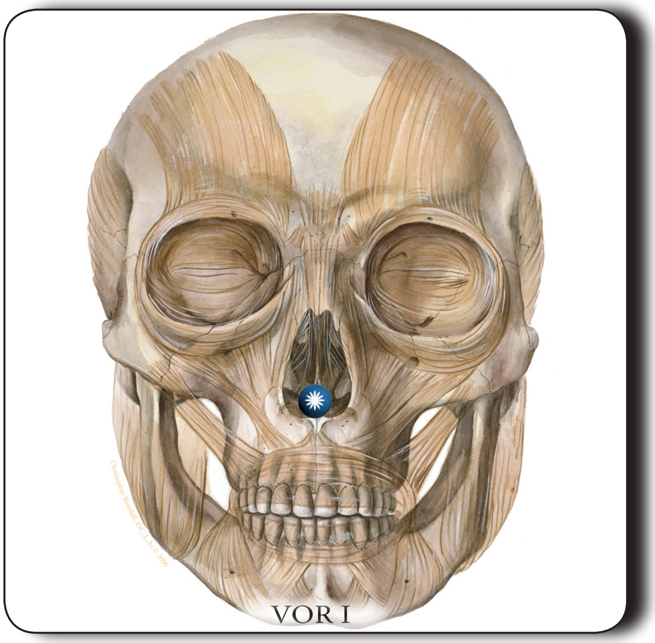
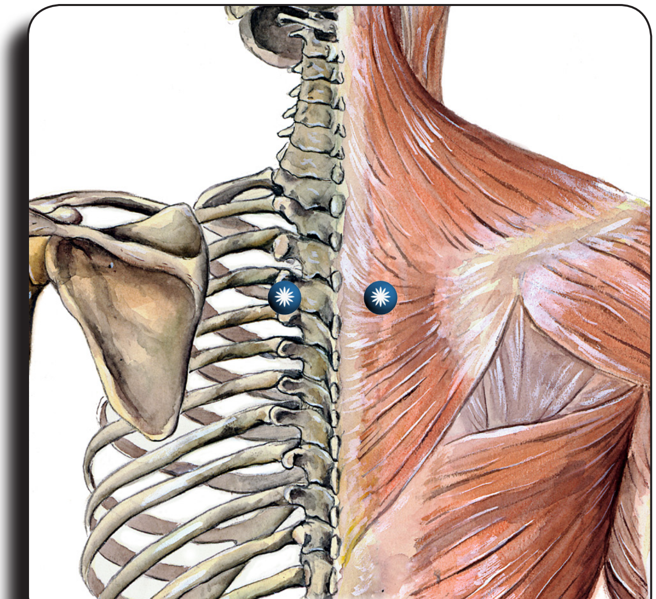
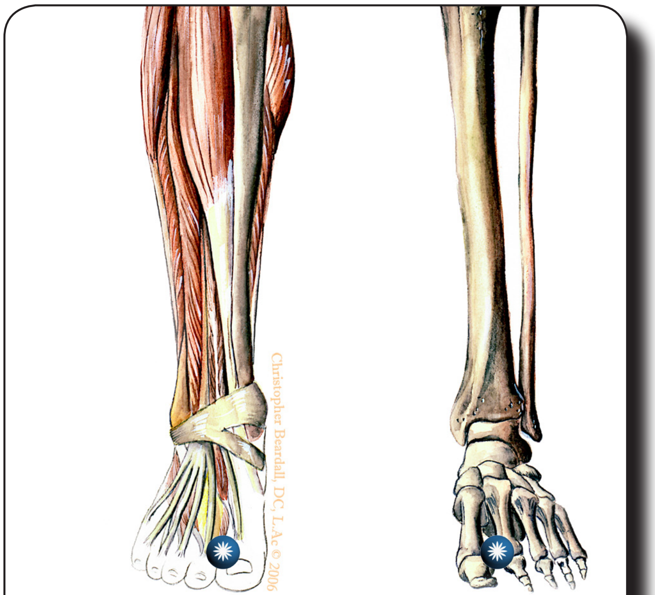


VOR I



VOR II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MUSCLE ACUPUNCTURE POINT

Muscle 972: ABDUCTOR DIGITUS PEDIS, Fifth (Flexor Digiti Quinti Brevis)

ORIGIN: Plantar surface of the base of the fifth metatarsal.

INSERTION: Base and lateral surface of the proximal phalanx of the fifth toe and onto the tendon of extensor digitorum longus.

ACTION: Abduct the proximal, phalanx of the fifth toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.
M.T.P.: Abduct and slightly flex the proximal phalanx of the fifth toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and medial aspect of fifth metatarsal.
Contact: Lateral aspect of proximal phalanx of fifth toe.
Direction: Adduct fifth toe.

NEUROVASCULAR: (Ant/BL) Nasal bone, distal surface, just lateral to nasal suture.

NEUROLYMPHATIC: (Post/R) Ninth I.C.S., at transverse process.

VISCERAL ORGAN:

I. *Nose:* (Ant/Midline) Gv 25, under nose.

II. *Lungs:* (Post/BL) Spinal level of T4.

M. A. P. : Lv 2

V.L. : T1 L

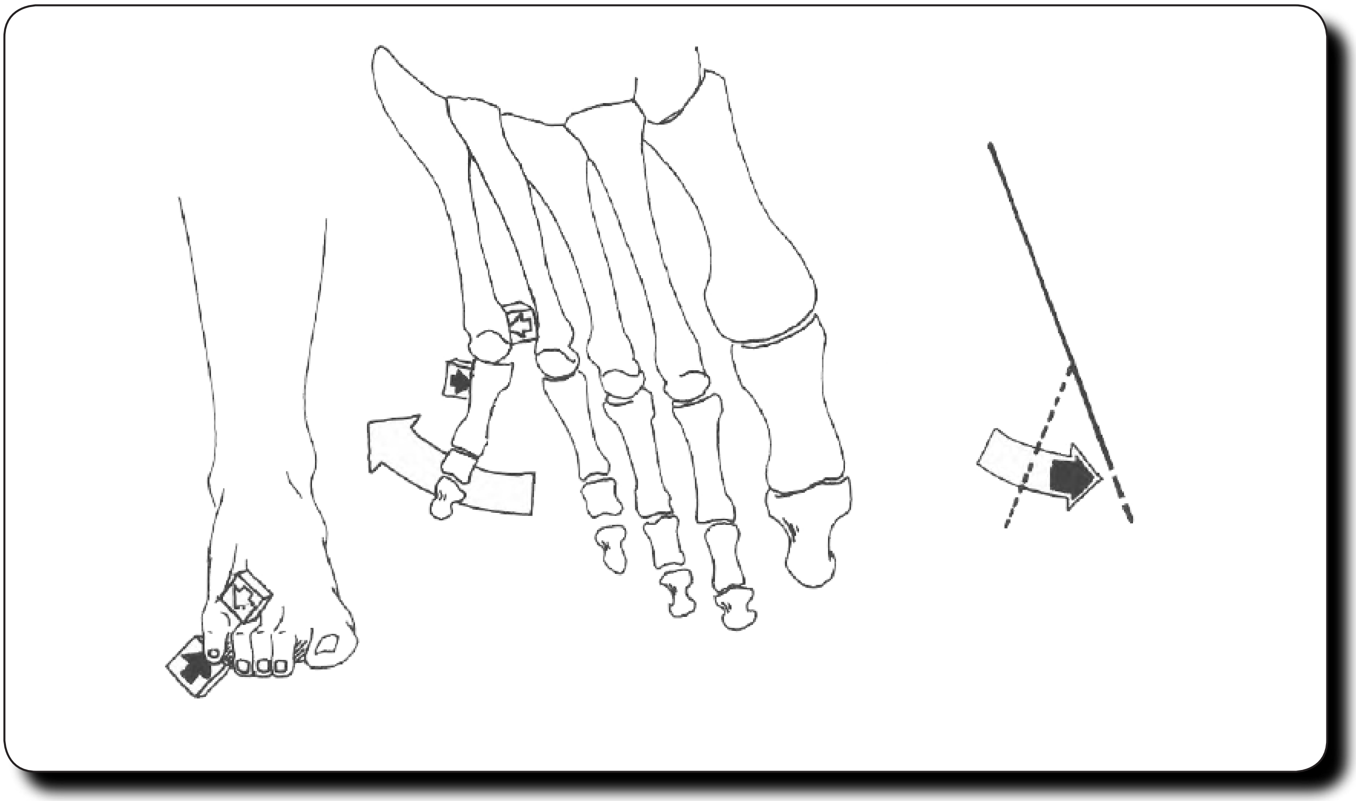
L. B. V.L. : T10 L

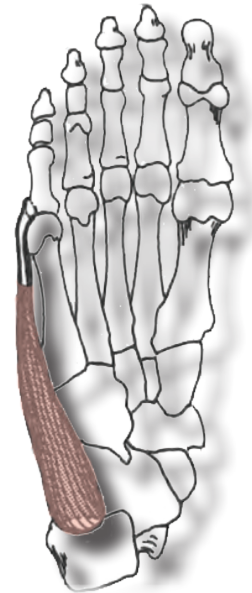
M. M. : S2

CRANIAL: Temporal

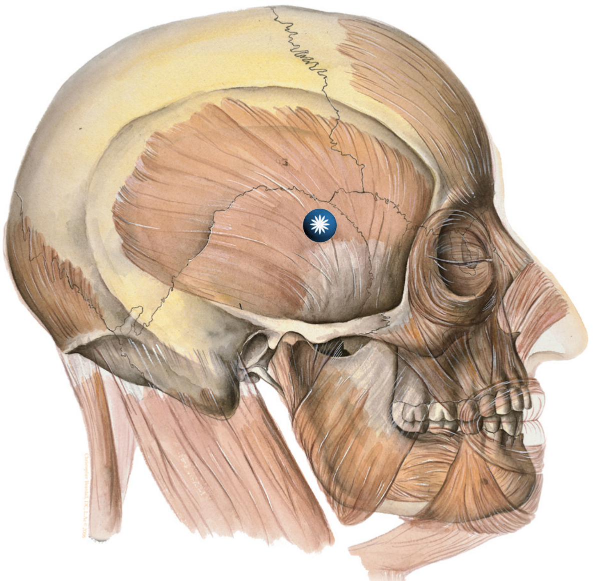
FOOT: Cuboid

NUTRIENT SOURCE: Paraminobenzoic Acid
1. Nutri Comp (N.W.)

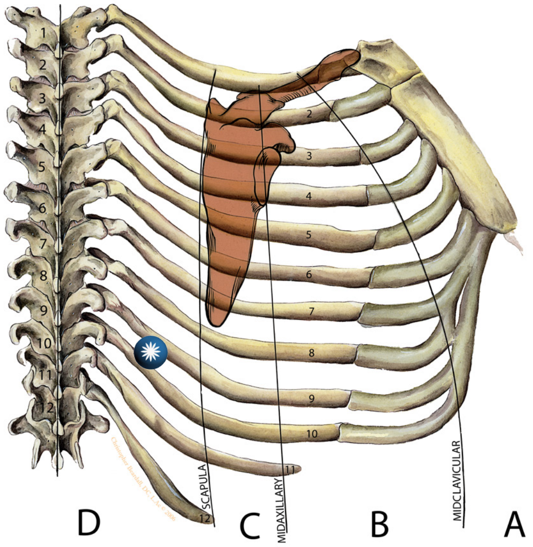




ABDUCTOR DIGITUS MINIMI PEDIS



NEUROVASCULAR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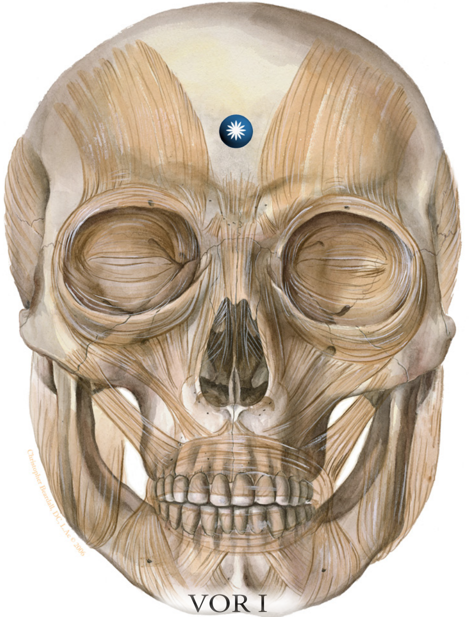
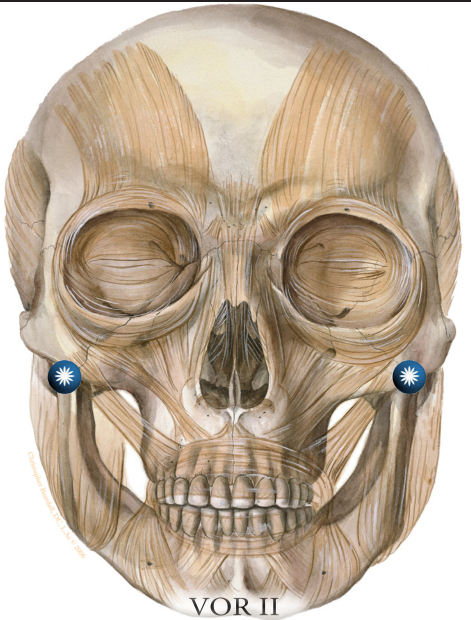
NEUROLYMPHATIC



VOR I



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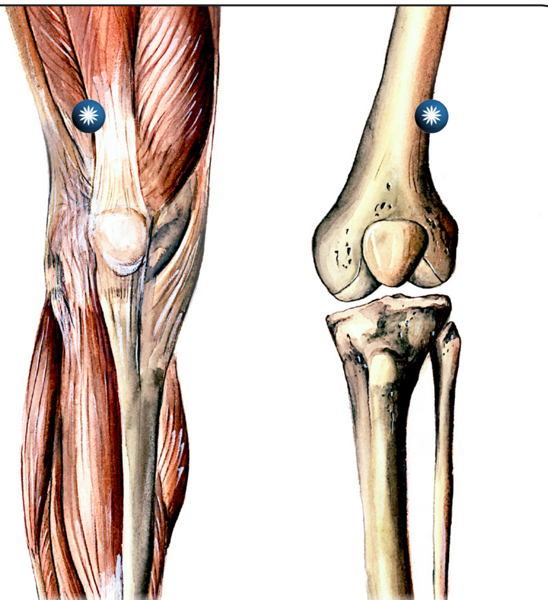


MUSCLE ACUPUNCTURE POINT

Muscle 974: ABDUCTOR DIGITUS MINIMI PEDIS

ORIGIN: Calcaneus.

INSERTION: Distal end of fifth metatarsal and base of proximal phalanx of fifth toe.

ACTION: Abducts the fifth toe and with continued action, the foot.

TEST:

Patient: Position: Supine.
M.T.P.: Place foot in 110 degrees dorsiflexion, abduct foot 15 degrees. This is a test for foot abduction at this degree of dorsiflexion.

Doctor: Position: End of table facing patient.
Brace: Medial aspect of calcaneus.
Contact: Lateral and distal aspect of fifth metatarsal.
Direction: Adduct foot through coronal plane.

NEUROVASCULAR: (Lat) Temporal bone, just inferior to squamosphenoid suture junction.

NEUROLYMPHATIC: (Post/R) Ninth I.C.S., 2" from spine.

VISCERAL ORGAN:

I. *Nose:* (Ant/Midline) Gv 24.3; midline at level of frontal prominences.

II. *Posterior Pituitary:* (Ant/BL) Maxillary bone, lateral superior surface, under zygoma.

M. A. P. : S 33

V.L. : C5 R

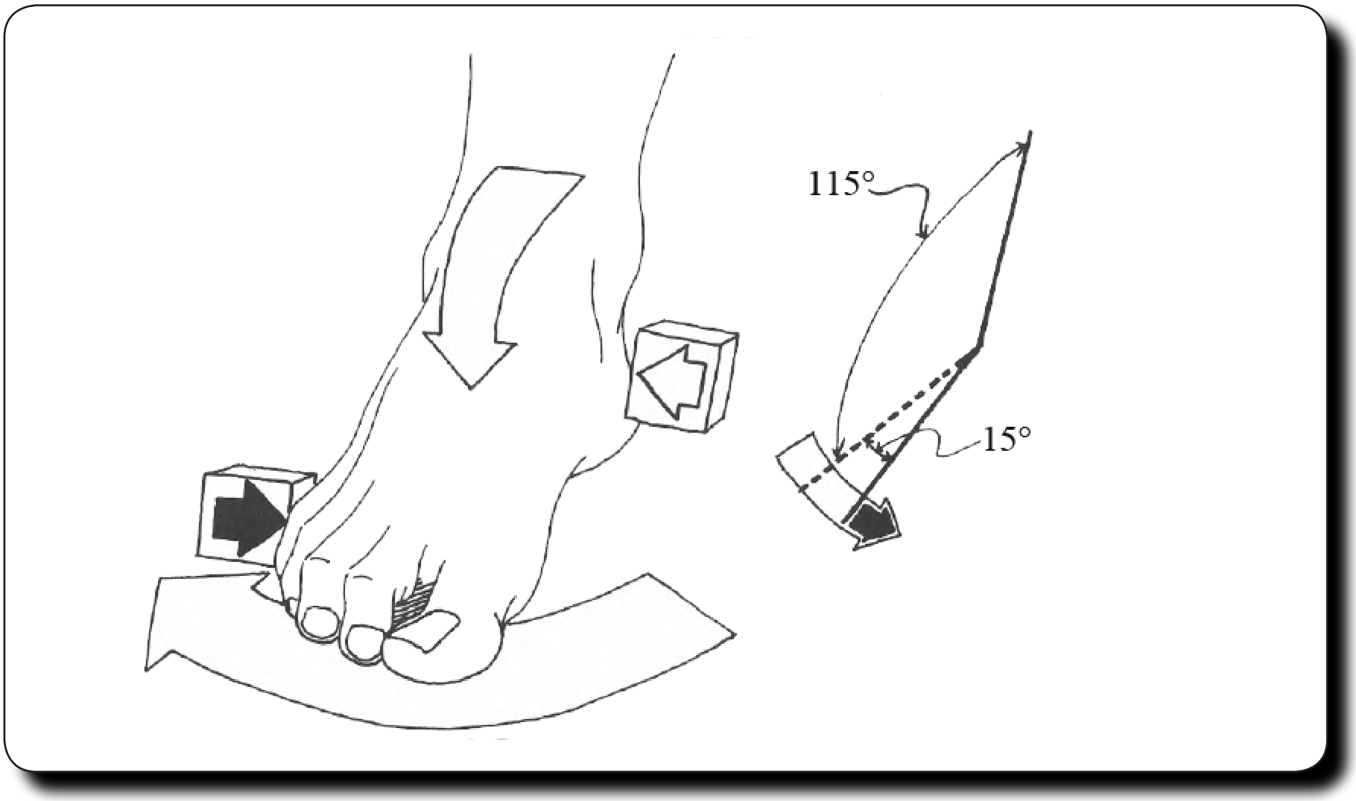
L. B. V.L. : L1 R

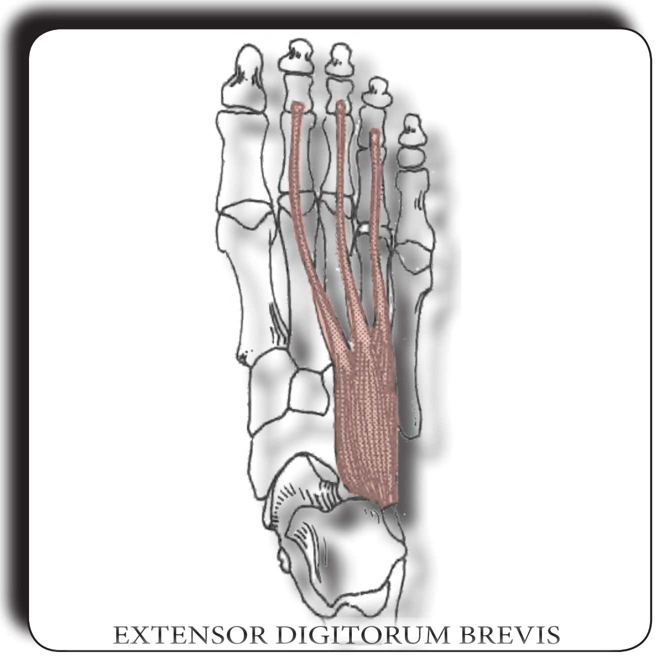
M. M. : S2

CRANIAL: In Research

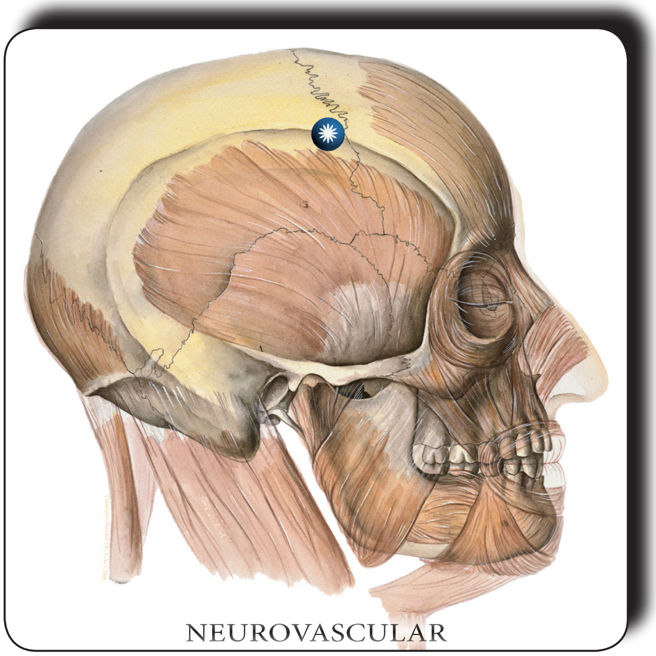
FOOT: In Research

NUTRIENT SOURCE: Vitamin A
1. Vitamin A (S)
2. Core Vitamin A (N.W.)

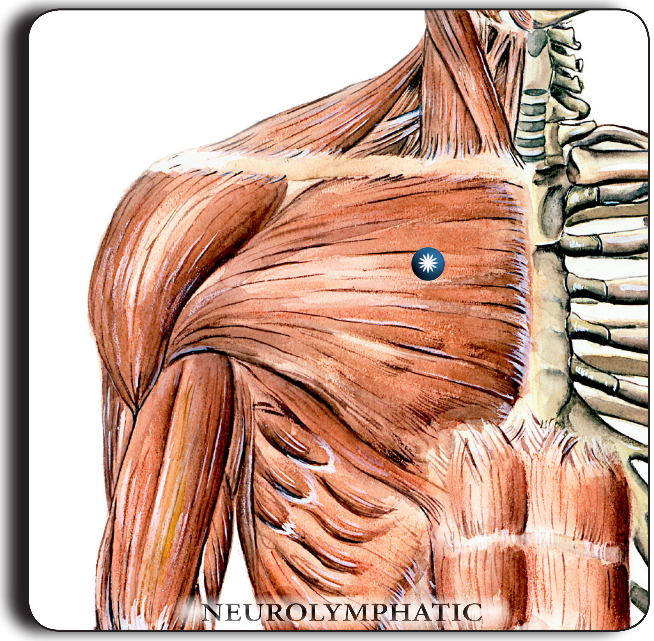




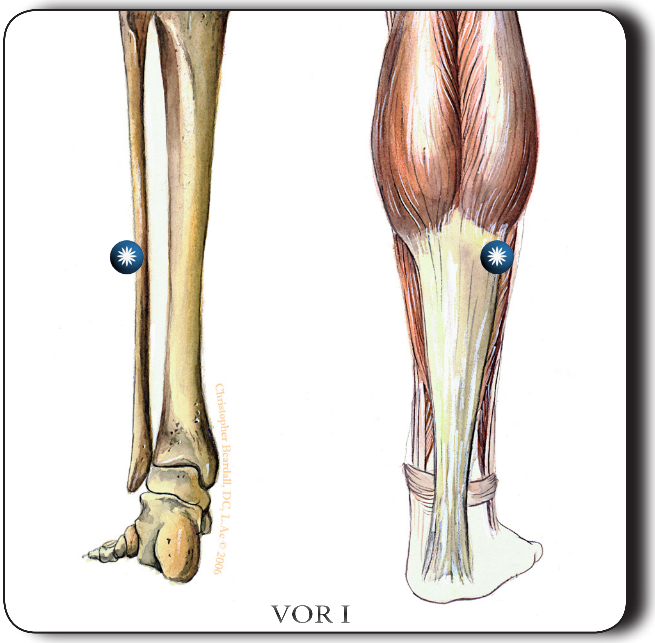
EXTENSOR DIGITORUM BREVIS



NEUROVASCULAR



NEUROLYMPHATIC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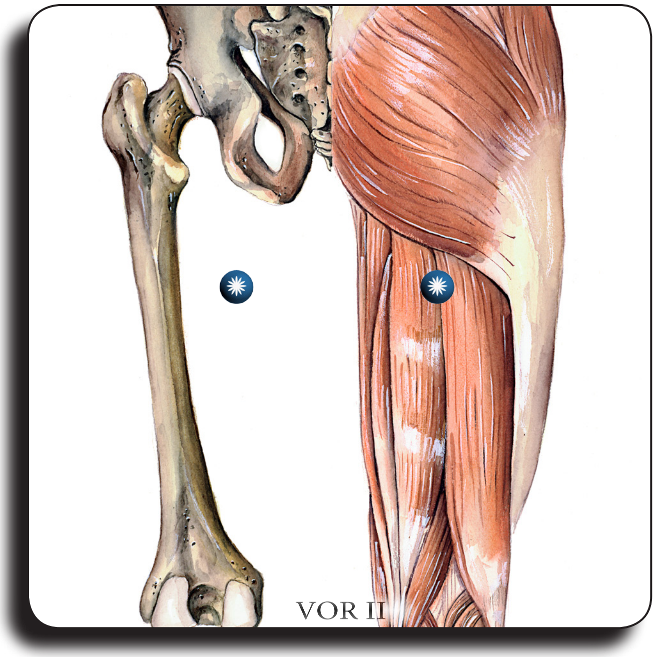
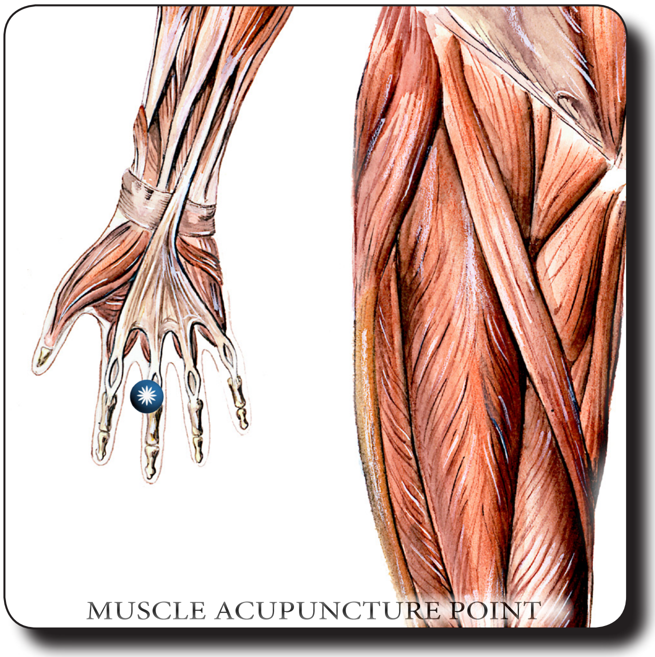
VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 976: EXTENSOR DIGITORUM BREVIS

ORIGIN: Upper and lateral surfaces of calcaneus.

INSERTION: Lateral side of the tendons of extensor digitorum longus of second, third, and fourth toes.

ACTION: Dorsiflexes the proximal phalanges of the second, third and fourth toes.

TEST:

Patient: Position: Supine.
M.T.P.: Dorsiflex the proximal phalanx of the second, third and fourth toes.

Doctor: Position: End of table facing patient.
Brace: Plantar surface of foot.
Contact: Dorsal surface of proximal phalanx of second, third, and fourth toes.
Direction: Plantar flex and slightly adduct.

NEUROVASCULAR: (Lat) Parietal bone, superior to temporal line, 1" posterior to coronal suture.

NEUROLYMPHATIC: (Ant/R) Second I.C.S., 1-2" lateral to sternum.

VISCERAL ORGAN:

I. *Thymus:* (Post/BL) Tendon of gastrocnemius midline, 2" inferior to B 58.

II. *Tonsils:* (Post/BL) B 50.2

M. A. P. : Cx 8.4

V.L. : L2 L

L. B. V.L. : C4 L

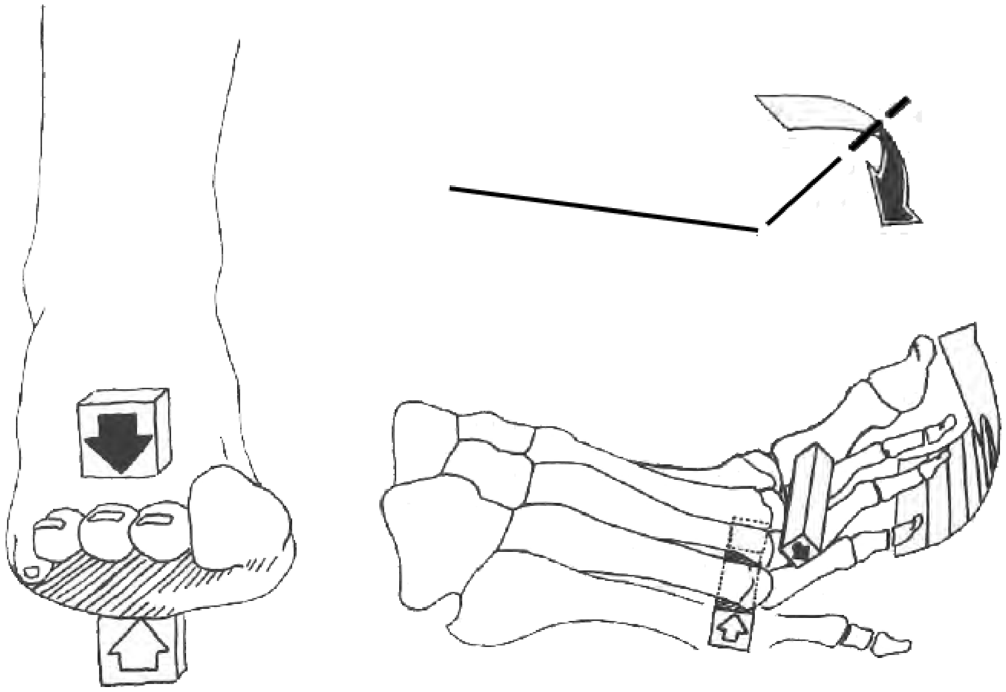
M. M. : S2

CRANIAL: Lacrimal

FOOT: Proximal Phalanx of Second Toe

NUTRIENT SOURCE: Choline

1. Choline (S)
2. Core Choline (N.W.)



CHAPTER IV:

REFERENCES

ORGAN-MUSCLE RELATIONSHIPS

ADENOIDS

526	Extensor Pollicis Brevis Septal Div.
932	Abductor Hallucis, Oblique Head, Peroneus Division

ADRENAL

114	Masseter Superficial Div.
302	Sternothyroideus
326	Splenius Cervicis
456	Deltoideus Anterior Scapular Div.
484	Pronator Teres Humeral Div.
504	Flexor Carpi Radialis Flexor Div.
534	Flexor Pollicis Brevis
582	Abductor Digiti Minimi Manus, Flexor Div.
614	Longissimus Thoracis Upper Lumbar Div.
700	Rectus Abdominis First Div.
726	Psoas Major Diaphragmatic Div.
808	Gracilis
810	Sartorius
818	Vastus Medialis Middle Div.
840	Articularis Genu
854	Semitendinosis
856	Semimembranosis Tibial Div.
878	Soleus Medial Div.
968	Abductor Digitus Pedis Third

ANTERIOR PITUITARY

100	Orbicularis Oris Lower Div.
314	Longus Capitis
322	Splenius Capitis Mastoid Div.
422	Supraspinatus Fossa Div.
464	Pectoralis Major Costal Div.
520	Extensor Pollicis Longus Ulnar Div.
546	Adductor Pollicis Obliquus
558	Flexor Digitorum Superficialis Lateral Div.
570	Interossei Dorsales Manus First
844	Adductor Magnus Oblique Div.
878	Soleus Medial Div.
900	Flexor Hallucis Longus Tibial Div.
904	Extensor Hallucis Longus Interosseous Div.
908	Flexor Digitorum Longus Medial Div.
910	Flexor Digitorum Longus Lateral Div.
920	Adductor Hallucis Superior Div.

BLADDER

278	Scalenus Anterior
290	Digastricus Anterior Belly Div.
296	Mylohyoideus
392	Trapezius Lower Div.
446	Coracobrachialis Septal Div.
476	Articularis Cubiti
488	Anconeus Olecranon Div.
536	Interossei Pollicis (Palmaris First)
560	Flexor Digitorum Profundus Manus Medial Div.
570	Interossei Dorsales Manus First
610	Spinalis Thoracis Lumbar Div.
648	Serratus Posterior Superior Div.
690	Pyramidalis
708	Rectus Abdominis Fourth Div. Lateralis
726	Psoas Major Diaphragmatic Div.
842	Adductor Magnus Vertical Div.
852	Gluteus Maximus Coccygeal Div.
886	Peroneus Longus Cuneiform Div.
892	Peroneus Brevis Septal Div.
894	Peroneus Tertius
960	Adductor Digitus Pedis Third

BROAD LIGAMENT

844	Adductor Magnus Oblique Div.

COLON (ASCENDING/DESCENDING)

270	Upper Trapezius Scapular Div.
350	Interspinalis Cervicis
450	Deltoideus Posterior Lateral Div.
510	Extensor Carpi Ulnaris Adductor Div.
692	Obliquus Externus Abdominis Anterior Div.
700	Rectus Abdominis First Div.
710	Iliacus
730	Quadratus Lumborurn Costal Div.
790	Tensor Fascia Lata Anterior Div.
824	Biceps Femoris Shorthead
826	Biceps Femoris Longhead Fibular Div.
874	Gastrocnemius Lateral Div.
948	Flexor Digitorum Brevis Lateral Div.

COLON (RECTAL AREA)

288	Platysma Posterior Div.
722	Psoas Major Lumbar Div.
852	Gluteus Maximus Coccygeal Div.
880	Soleus Lateral Div.
938	Abductor Hallucis Transverse Head Lateral Div.

COLON (SIGMOID)

468	Biceps Brachii Shorthead
642	Levatores Costarum Lower Div.
734	Multifidus Lumbosacral Div.

COLON (TRANSVERSE)

058	Levator Palpebrae Superioris
102	Buccinator
418	Latissimus Dorsi Iliac Div.
798	Pectineus

COLON (HEPATIC AND SPLENIC FLEXURE)

696	Obliquus Internus Abdominis Anterior Div.

DUCTUS DEFERENS

070	Depressor Septi Nasi
278	Scalenus Anterior
506	Flexor Carpi Ulnaris Flexor Div.
548	Extensor Digitorum Communis Manus Medial Div.
734	Multifidus Lumbosacral Div.
898	Tibialis Anterior Dorsiflexor Div.
946	Flexor Digitorum. Brevis Medial Div.

DUODENUM

872	Gastrocnemius, Medial Division
886	Peroneus Longus, Cuneiform Division

DUODENUM (HORIZONTAL PORTION)

702	Rectus Abdominis Second Div.

DUODENUM (ASCENDING PORTION)

706	Rectus Abdominis Fourth Div. Medialis

DUODENUM (DESCENDING PORTION)

286	Platysma Anterior Div.
718	Transverse Abdominis Lower Div.

DUODENUM (SPECIAL CELLS)

514	Extensor Carpi Radialis Brevis
816	Vastus Medialis Upper Div
872	Gastrocnemius, Medial Div
886	Peroneus Longus, Cuneiform Div.

DUODENUM (SUPERIOR PORTION)

470	Triceps Longhead

DUODENUM (L-JEJUNUM JUNCTION; R-AMPUILA OF VATER)

800	Adductor Brevis

EAR (EXTERNAL)

410	Subclavius Clavicular Div.
432	Teres Major Superior Div.
952	Flexor Digitus Pedis Third

EAR (INTERNAL)

060	Orbicularis Occuli Upper Div.
272	Upper Trapezius Clavicular Div
390	Trapezius Middle Div
492	Supinator Radial Div.

EPIDIDYMIS

522	Extensor Pollicus Longus Septal Div.
864	Gemellus Superior

ESOPHAGUS

422	Supraspinatus Fossa Div
440	Subscapularis Second Div.
502	Flexor Carpi Radialis Abductor Div.
566	Interossei Dorsales Manus Third
706	Rectus Abdominis Fourth Div. Medialis
902	Flexor Hallucis Longus Fibular Div.

EUSTACHIAN TUBE

470	Triceps Longhead
496	Pronator Quadratus Proximal Div.
790	Tensor Fascia Lata Anterior Div.
824	Biceps Femoris Shorthead

EYE

270	Upper Trapezius Scapular Div.
298	Geniohyoideus
306	Omohyoideus
426	Infraspinatus Middle Div.
450	Deltoideus Posterior Lateral Div.
696	Obliquus Internus Abdominis Anterior Div.
704	Rectus Abdominis Third Div.
738	Longissimus Lumborum
800	Adductor Brevis
958	Adductor Digitus Pedis Second
962	Adductor Digitus Pedis Fourth

GALLBLADDER

098	Orbicularis Oris Upper Div.
274	Sternocleidomastoid Sternal Div.
282	Scalenus Medius
292	Digastricus Posterior Belly Div.
426	Infraspinatus Middle Div.
454	Deltoideus Middle Anterior Div.
472	Triceps Lateral Head
502	Flexor Carpi Radialis Abductor Div.
596	Palmaris Brevis
642	Levatores Costarum Lower Div.
732	Quadratus Lumborum Lumbar Div.
818	Vastus Medialis Middle Div.
870	Popliteus
888	Peroneus Longus Metatarsal Div.

GALLBLADDER DUCT SYSTEM

052	Occipitalis
134	Rectus Medialis Bulbi
300	Sternohyoideus
428	Infraspinatus Inferior Division
520	Extensor Pollicis Longus Ulnar Div.
524	Extensor Pollicis Brevis, Radial Div.
542	Abductor Pollicis Brevis

GONADS

100	Orbicularis Oris Lower Div.
102	Buccinator
124	Pterygoideus Lateralis (Ext.) Upper Div.-Disc
126	Pterygoideus Lateralis (Ext.) Lower Div.
308	Longus Colli Vertical Div.
402	Serratus Anterior Superior Div.
430	Teres Minor
468	Biceps Brachii Shorthead
480	Brachioradialis Humeral Div.
492	Supinator Radial Div.
538	Opponens Pollicis Flexor Div.
592	Interossei Palmares Third
784	Gluteus Medius Anterior Div.
806	Adductor Longus Superior Div.
840	Articularis Genu
860	Piriformis

HEART

326	Splenius Cervicis
406	Pectoralis Minor Superior Div.
436	Subscapularis Superior Div.
440	Subscapularis Second Div.
460	Pectoralis Major Clavicular Div.
488	Anconeus Olecranon Div.
544	Adductor Pollicis Transversus
564	Interossei Dorsales Manus Fourth
610	Spinalis Thoracis Lumbar Div.
612	Spinalis Thoracis Thoracic Div.
656	Diaphram Number One Right Side Lumbar Div.
744	Pubococcygeus
812	Obturator Externus
864	Gemellus Superior
884	Tibialis Posterior Fibular Div.
906	Extensor Hallucis Longus Fibular Div.
912	Extensor Digitorum Longus Medial Div.
922	Adductor Hallucis Inferior Div.

ILEUM

506	Flexor Carpi Ulnaris Flexor Div.
544	Adductor Pollicis Transversus
704	Rectus Abdominis Third Div.
740	Coccygeus Sacral Div.
804	Adductor Longus Inferior Div.
820	Vastus Medialis Lower Div.
834	Vastus Lateralis Lower Div.
836	Vastus Intermedius Medial Div.
882	Tibialis Posterior Tibial Div.
936	Abductor Hallucis Transverse Head Medial Div.

ILEUM (SPECIAL CELLS)

480	Brachioradialis Humeral Div.
584	Abductor Digiti Minimi Manus Abductor Div.
594	Interossei Palmares Second
858	Semimembranosis Popliteal Div.

JEJUNUM

478	Brachialis
562	Flexor Digitorum Profundus Manus Lateral Div.
586	Opponens Digiti Minimi Manus
652	Serratus Posterior Inferior Div.
738	Longissimus Lumborum
796	Rectus Femoris Straight Head
876	Plantaris
896	Tibialis Anterior Supinator Div.
930	Flexor Hallucis Brevis Cuboid Div.
940	Extensor Hallucis Brevis

JEJUNUM (SPECIAL CELLS)

308	Longus Colli Vertical Div.

KIDNEY

130	Rectus Superior Bulbi
284	Scalenus Posterior
302	Sternothyroideus
392	Trapezius Lower Div.
408	Pectoralis Minor Inferior Div.
444	Coracobrachialis Coracoid Div.
466	Biceps Brachii Longhead
482	Brachioradialis Septal Div.
486	Pronator Teres Ulnar Div.
498	Pronator Quadratus Distal Div.
500	Palmaris Longus
512	Extensor Carpi Ulnaris Extensor Div.
516	Extensor Carpi Radialis Longus Extensor Div.
554	Extensor Indicis Proprius
712	Iliacus Minor
722	Psoas Major Lumbar Div.
724	Psoas Major Thoracic Div.
872	Gastrocnemius Medial Div.
902	Flexor Hallucis Longus Fibular Div.
910	Flexor Digitorum Longus Lateral Div.
952	Flexor Digitus Pedis Third

LARYNX

276	Sternocleidomastoid Clavicular Div.
590	Interossei Palmares Fourth
822	Obturator Internus
944	Quadratus Plantae Lateral Div.
946	Flexor Digitorum Brevis Medial Div.

LIVER

098	Orbicularis Oris Upper Div.
134	Rectus Medialis Bulbi
138	Obliquus Superior Bulbi
140	Obliquus Inferior Bulbi
380	Constrictor Pharyngis Medius
398	Rhomboid Minor
400	Rhomboid Major
412	Subclavius Scapular Div.
462	Pectoralis Major Sternal Div.
494	Supinator Ulnar Div.
518	Extensor Carpi Radialis Longus Abductor Div.
524	Extensor Pollicis Brevis Radial Div.
562	Flexor Digitorum Profundus Manus Lateral Div.
578	Lumbricales Manus First
730	Quadratus Lumborum Costal Div.
794	Rectus Femoris, Reflected Head
806	Adductor Longus Superior Div.
874	Gastrocnemius Lateral Div.
880	Soleus Lateral Div.
900	Flexor Hallucis Longus Tibial Div.
922	Adductor Hallucis Inferior Div.
956	Flexor Digitus Pedis, Fifth

LUNGS

114	Masseter Superficial Div.
346	Obliquus Capitis Superior
402	Serratus Anterior Superior Div.
404	Serratus Anterior Inferior Div.
406.	Pectoralis Minor Superior Div
408	Pectoralis Minor Inferior Div.
434	Teres Major Inferior Div.
446	Coracobrachialis Septal Div.
452	Deltoideus Middle Posterior Div.
454	Deltoideus Middle Anterior Div.
456	Deltoideus Anterior Scapular Div.
458	Deltoideus Anterior Clavicular Div.
482	Brachioradialis Septal Div.
552	Extensor Digiti Minimi Manus
584	Abductor Digiti Minimi Manus Abductor Div.
736	Iliocostalis Lumborum
744	Pubococcygeus
784	Gluteus Medius Anterior Div.

Lungs (Continued)

786	Gluteus Minimus Anterior Div.
816	Vastus Medialis Upper Div.
822	Obturator Internus
862	Gemellus Inferior
890	Peroneus Brevis Fibular Div.
894	Peroneus Tertius
928	Flexor Hallucis Brevis Third Cuneiform Div.
930	Flexor Hallucis Brevis Cuboid Div.
934	Abductor Hallucis Oblique Head Metatarsal Div.
972	Abductor Digitus Pedis Fifth

Lymphatics Of Colon

546	Adductor Pollicis Obliquus
572	Lumbricales Manus Fourth
582	Abductor Digiti Minimi Manus, Flexor Div.
694	Obliquus Externus Abdominis Lateral Div.

Lymphatics Of Duodenum

416	Latissimus Dorsi Lumbar Div.

Lymphatics Of Face And Neck

276	Sternocleidomastoid Clavicular Div.
530	Abductor Pollicis Longus Ulnar Div.

Lymphatics Of Gallbladder

132	Rectus Inferior Bulbi
490	Anconeus Ulnar Div.

Lymphatics Of Gallbladder Duct System

138	Obliquus Superior Bulbi
580	Flexor Digiti Minimi Brevis Manus

Lymphatiacs Of Ileum

414	Latissimus Dorsi Thoracic Div.
796	Rectus Femoris Straight Head
810	Sartorius
950	Flexor Digitus Pedis Second

Lymphatics Of Jejunum

140	Obliquus Inferior Bulbi
710	Iliacus
938	Abductor Hallucis Transverse Head Lateral Div.

Lymphatics Of Lungs

140	Obliquus Inferior Bulbi
424	Infraspinatus, Superior Div.
648	Serratus Posterior Superior Div.
710	Iliacus
938	Abductor Hallucis Transverse Head Lateral Div.

Lymphatics Of Rectal Area

574	Lumbricales Manus Third

Lymphatics Of Small Intestine (Inguinal Lymph Nodes)

656	Diaphram Number One Right Side Lumbar Div.

Lymphatics Of Stomach

728	Psoas Minor
924	Flexor Hallucis Brevis First Cuneiform Div.

Lymphatics Of Submandibular

282	Scalenus Medius
856	Semimembranosis Tibial Div.

Lymphatics Of Thoracic Duct

522	Extensor Pollicus Longus Septal Div.

Lymphatics Of Throat

500	Palmaris Longus

Lymphatics Of Thyroid

846	Adductor Magnus Transverse Div.

Lymphatics Of Tonsils

876	Plantaris

Mammary Gland

400	Rhomboid Major
462	Pectoralis Major Sternal Div.
614	Longissimus Thoracis Upper Lumbar Div.
724	Psoas Major Thoracic Div.
782	Gluteus Medius Middle Div.

NOSE

304	Thyrohyoideus
444	Coracobrachialis Coracoid Div.
508	Flexor Carpi Ulnaris Adductor Div.
514	Extensor Carpi Radialis Brevis
530	Abductor Pollicis Longus Ulnar Div.
572	Lumbricales Manus Fourth
652	Serratus Posterior Inferior Div.
690	Pyramidalis
814	Quadratus Femoris
846	Adductor Magnus Transverse Div.
892	Peroneus Brevis Septal Div.
934	Abductor Hallucis Oblique Head Metatarsal Div.
972	Abductor Digitus Pedis Fifth
974	Abductor Digiti Minimi Pedis

OVARIES/TESTICLE

884	Tibialis Posterior Fibular Div.
936	Abductor Hallucis Transverse Head Medial Div.

PANCREAS

110	Temporalis Parietal Div.
136	Rectus Lateralis Bulbi
274	Sternocleidomastoid Sternal Div.
286	Platysma Anterior Div.
322	Splenius Capitis Mastoid Div.
370	Thyroarytenoideus
414	Latissimus Dorsi Thoracic Div.
532	Abductor Pollicis Longus Radial Div.
542	Abductor Pollicis Brevis
550	Extensor Digitorum Communis Manus Lateral Div.
554	Extensor Indicis Proprius
556	Flexor Digitorum Superficialis Medial Div.
580	Flexor Digiti Minimi Brevis Manus
712	Iliacus Minor
786	Gluteus Minimus Anterior Div.
848	Gluteus Maximus Iliac Div.
882	Tibialis Posterior Tibial Div.

PANCREAS (INGUINAL LYMPH NODES)

662	Diaphram Number Four Left Side Lumbar Div.

Pancreatic Duct System

062	Orbicularis Occuli Lower Div.
112	Temporalis Occipital Div.
288	Platysma Posterior Div.
290	Digastricus Anterior Belly Div.
362	Cricoarytenoideus Lateralis
410	Subclavius Clavicular Div.
442	Subscapularis Inferior Div.
490	Anconeus Ulnar Div.
518	Extensor Carpi Radialis Longus Abductor Div.
526	Extensor Pollicis Brevis Septal Div.
528	Flexor Pollicis Longus
566	Interossei Dorsales Manus Third
588	Opponens Digiti Minimi Manus Flex. Div.
618	Longissimus Thoracis Middle Thoracic Div.
740	Coccygeus Sacral Div.
752	Cremaster Number 3
788	Gluteus Minimus Posterior Div.
798	Pectineus
832	Vastus Lateralis Middle Div.
834	Vastus Lateralis Lower Div.
836	Vastus Intermedius Medial Div.
848	Gluteus Maximus Iliac Div.
858	Semimembranosis Popliteal Div.
926	Flexor Hallucis Brevis Tendonal Div.
940	Extensor Hallucis Brevis
958	Adductor Digitus Pedis Second

Parathyroid

070	Depressor Septi Nasi
888	Peroneus Longus Metatarsal Div.
126	Pterygoideus Lateralis (Ext.) Lower Div.
574	Lumbricales Manus Third
396	Levator Scapula Inferior Div.
576	Lumbricales Manus Second

Penis/Vaginal Vault

058	Levator Palpebrae Superioris
332	Semispinalis Capitis
434	Teres Major Inferior Div.
464	Pectoralis Major Costal Div.
484	Pronator Teres Humeral Div.
708	Rectus Abdominis Fourth Div. Lateralis
780	Gluteus Medius Posterior Div.
788	Gluteus Minimus Posterior Div.

PENIS/VAGINAL VAULT (CONTINUED)

792	Tensor Fascia Lata Posterior Div.
804	Adductor Longus Inferior Div.
870	Popliteus
944	Quadratus Plantae Lateral Div.
954	Flexor Digitus Pedis, Fourth

PHARYNX

110	Temporalis Parietal Div.
380	Constrictor Pharyngis Medius
540	Opponens Pollicis Abductor Div.
548	Extensor Digitorum Communis Manus Medial Div.
592	Interossei Palmares Third

PINEAL

112	Temporalis Occipital Div.
124	Pterygoideus Lateralis (Ext.) Upper Div.—Disc
432	Teres Major Superior Div.
540	Opponens Pollicis Abductor Div.
612	Spinalis Thoracis Thoracic Div.
924	Flexor Hallucis Brevis First Cuneiform Div.

POSTERIOR PITUITARY

118	Masseter Deep Div.
120	Pterygoideus Medialis (Int.) Sphenoid Div.
390	Trapezius Middle Div.
398	Rhomboid Minor
412	Subclavius Scapular Div.
436	Subscapularis Superior Div.
486	Pronator Teres Ulnar Div.
538	Opponens Pollicis Flexor Div.
552	Extensor Digiti Minimi Manus
578	Lumbricales Manus First
714	Transverse Abdominis Upper Div.
728	Psoas Minor
820	Vastus Medialis Lower Div.
850	Gluteus Maximus Sacral Div.
854	Semitendinosis
914	Extensor Digitorum Longus Lateral Divison
974	Abductor Digiti Minimi Pedis

PROSTATE/UTERUS

300	Sternohyoideus
314	Longus Capitis
334	Semispinalis Cervicis
370	Thyroarytenoideus
442	Subscapularis Inferior Div.
460	Pectoralis Major Clavicular Div.
474	Triceps Medial Head
494	Supinator Ulnar Div.
508	Flexor Carpi Ulnaris Adductor Div.
512	Extensor Carpi Ulnaris Extensor Div.
588	Opponens Digiti Minimi Manus Flexor Div.
698	Obliquus Internus Abdominis Lateral Div.
746	Iliococcygeus
782	Gluteus Medius Middle Div.
808	Gracilis
828	Biceps Femoris Longhead Tibial Div.
842	Adductor Magnus Vertical Div.
850	Gluteus Maximus Sacral Div.
860	Piriformis
862	Gemellus Inferior
912	Extensor Digitorum Longus Medial Div
920	Adductor Hallucis Superior Div.
970	Abductor Digitus Pedis Fourth

SALIVARY GLANDS (PAROTID)

362	Cricoarytenoideus Lateralis
396	Levator Scapula Inferior Div.
416	Latissimus Dorsi Lumbar Div.
476	Articularis Cubiti
836	Vastus Intermedius Medial Div.

SALIVARY GLANDS (SUBLINGUAL)

334	Semispinalis Cervicis
472	Triceps Lateral Head
594	Interossei Palmaris Second
596	Palmaris Brevis
702.	Rectus Abdominis Second Div
714	Transverse Abdominis Upper Div.
828	Biceps Femoris Longhead Tibial Div.
838	Vastus Intermedius Lateral Div
942	Quadratus Plantae, Med. Div.
948	Flexor Digitorum Brevis Lateral Div.

Salivary Glands (Submaudibular)

832	Vastus Lateralis Middle Div.
928	Flexor Hallucis Brevis Third Cuneiform Div.
962	Adductor Digitus Pedis Fourth

Seminal Vesicle

532	Abductor Pollicis Longus Radial Div.
576	Lumbricales Manus, Second

Sinus

536	Interossei Pollicis (Palmaris First)

Sinus (Frontal)

394	Levator Scapula Superior Div.
568	Interossei Dorsales Manus Second
692	Obliquus Externus Abdominis Anterior Div.

Sinus (Maxillary)

420	Supraspinatus Spine Div.
498	Pronator Quadratus Distal Div.
586	Opponens Digiti Minimi Manus
950	Flexor Digitus Pedis Second
956	Flexor Digitus Pedis, Fifth

Sinus (Nasal)

964	Adductor Digitus Pedis Fifth

Sinus (Sphenoid)

438	Subscapularis Third Div.
694	Obliquus Externus Abdominis Lateral Div.

Spleen

306	Omohyoideus
332	Semispinalis Capitis
346	Obliquus Capitis Superior
394	Levator Scapula Superior Div.
448	Deltoideus Posterior Medial Div.
452	Deltoideus Middle Posterior Div.
466	Biceps Brachii Longhead
550	Extensor Digitorum Communis Manus Lateral Div.
560	Flexor Digitorum Profundus Manus Medial Div.
568	Interossei Dorsales Manus Second

SPLEEN (CONTINUED)

590	Interossei Palmares Fourth
662	Diaphram Number Four Left Side Lumbar Div.
752	Cremaster Number 3
812	Obturator Externus
826	Biceps Femoris Longhead Fibular Div.
898	Tibialis Anterior Dorsiflexor Div.
960	Adductor Digitus Pedis Third
966	Abductor Digitus Pedis Second

STOMACH

736	Iliocostalis Lumborum
908	Flexor Digitorum Longus Medial Div.
932	Abductor Hallucis Oblique Head Peroneus Div.

STOMACH (BODY)

618	Longissimus Thoracis Middle Thoracic Div.

STOMACH (FUNDUS)

350	Interspinalis Cervicis
496	Pronator Quadratus Proximal Div.

STOMACH (PYLORIC ANTRUM)

516	Extensor Carpi Radialis Longus Extensor Div.

STOMACH (PYLORIC VESTIBULE)

510	Extensor Carpi Ulnaris Adductor Div

STOMACH (PYLORIC CANAL)

742	Coccygeus Coccyx Div.

STOMACH (SPECIAL CELLS)

130	Rectus Superior Bulbi
132	Rectus Inferior Bulbi
458	Deltoideus Anterior Clavicular Div.
528	Flexor Pollicis Longus
942	Quadratus Plantae Medial Div.

TESTICLE/OVARIES

884	Tibialis Posterior Fibular Div.
936	Abductor Hallucis Transverse Head Medial Div.

THYMUS

062	Orbicularis Occuli Lower Div.
122	Pterygoideus Medialis (Int.) Palatine Div.
272	Upper Trapezius Clavicular Div.
304	Thyrohyoideus
404	Serratus Anterior Inferior Div.
420	Supraspinatus Spine Div.
428	Infraspinatus Inferior Div.
564	Interossei Dorsales Manus Fourth
718	Transverse Abdominis Lower Div.
742	Coccygeus Coccyx Div.
830	Vastus Lateralis Superior Div.
904	Extensor Hallucis Longus Interosseous Div.
954	Flexor Digitus Pedis, Fourth
966	Abductor Digitus Pedis Second
976	Extensor Digitorum Brevis

THYROID

052	Occipitalis
060	Orbicularis Occuli Upper Div.
118	Masseter Deep Div.
120	Pterygoideus Medialis (Int.) Sphenoid Div.
294	Stylohyoideus
298	Geniohyoideus
424	Infraspinatus Superior Div.
430	Teres Minor
438	Subscapularis Third Div.
474	Triceps Medial Head
504	Flexor Carpi Radialis Flexor Div.
746	Iliococcygeus
792	Tensor Fascia Lata Posterior Div.
794	Rectus Femoris Reflected Head
830	Vastus Lateralis Superior Div.
914	Extensor Digitorum Longus Lateral Divison
970	Abductor Digitus Pedis Fourth

TONSILS

122	Pterygoideus Medialis (Int.) Palatine Div.
296	Mylohyoideus
448	Deltoideus Posterior Medial Div.
478	Brachialis
558	Flexor Digitorum Superficialis Lateral Div.
698	Obliquus Internus Abdominis Lateral Div.
732	Quadratus Lumborum Lumbar Div.
838	Vastus Intermedius Lateral Div.
926	Flexor Hallucis Brevis Tendonal Div.
964	Adductor Digitus Pedis Fifth
976	Extensor Digitorum Brevis

URETER

294	Stylohyoideus
968	Abductor Digitus Pedis Third

URETHRA

284	Scalenus Posterior
418	Latissimus Dorsi Iliac Div.
906	Extensor Hallucis Longus Fibular Div.

URETHRA (MEMBRANOUS)

136	Rectus Lateralis Bulbi
890	Peroneus Brevis Fibular Div.

URETHRA (PROSTATE PORTION)

896	Tibialis Anterior Supinator Div.

UTERUS/PROSTATE

300	Sternohyoideus
314	Longus Capitis
334	Semispinalis Cervicis
370	Thyroarytenoideus
442	Subscapularis Inferior Div.
460	Pectoralis Major Clavicular Div.
474	Triceps Medial Head
494	Supinator Ulnar Div.
508	Flexor Carpi Ulnaris Adductor Div.
512	Extensor Carpi Ulnaris Extensor Div.
588	Opponens Digiti Minimi Manus Flexor Div.
698	Obliquus Internus Abdominis Lateral Div.
746	Iliococcygeus
782	Gluteus Medius Middle Div,
808	Gracilis
828	Biceps Femoris Longhead Tibial Div.
842	Adductor Magnus Vertical Div.
850	Gluteus Maximus Sacral Div.
860	Piriformis
862	Gemellus Inferior
912	Extensor Digitorum Longus Medial Div.
920	Adductor Hallucis Superior Div.
970	Abductor Digitus Pedis Fourth

VAGINAL VAULT/PENIS

058	Levator Palpebrae Superioris
332	Semispinalis Capitis
434	Teres Major Inferior Div.
464	Pectoralis Major Costal Div.
484	Pronator Teres Humeral Div.
708	Rectus Abdominis Fourth Div. Lateralis
780	Gluteus Medius Posterior Div.
788	Gluteus Minimus Posterior Div.
792	Tensor Fascia Lata Posterior Div.
804	Adductor Longus Inferior Div.
870	Popliteus
944	Quadratus Plantae Lateral Div.
954	Flexor Digitus Pedis, Fourth

VEINS OF STOMACH

292	Digastricus Posterior Belly Div.

VERTEBRAL LEVEL-MUSCLE RELATIONSHIPS

CERVICAL VERTEBRAL LEVELS

	LEFT		RIGHT
C1		C1	
C2	398, 464, 526, 578, 860	C2	844, 858
C3	058, 122, 290, 882	C3	098, 322, 542, 698, 832
C4	528, 554, 840, 894, 942 970	C4	442, 742, 848, 934
C5	402, 444, 452, 516, 652, 898, 902	C5	424, 460, 974
C6	448, 524, 572, 788, 852	C6	296, 416, 546, 618
C7		C7	392, 326

THORACIC VERTEBRAL LEVELS

	LEFT		RIGHT
T1	100, 564, 806, 924, 954, 972	T1	286, 514, 532, 740
T2	130, 512, 588, 808, 842	T2	300, 440, 486, 494, 582, 590, 864
T3	132, 134, 302, 438, 612, 642, 696, 796	T3	140, 430, 474, 838, 878
T4	308, 362, 426, 436, 704, 800	T4	332, 732, 780, 794, 910
T5	110, 404, 446, 538, 736, 948	T5	392, 408, 492, 496, 556, 594, 736, 814, 892
T6	070, 314, 510, 520, 548, 830	T6	276, 562, 568, 610, 708, 946, 960
T7	136, 414, 434, 530, 576, 804, 966	T7	398, 420, 490, 528, 566, 714, 834, 884
T8	400, 462, 482, 550, 614, 820, 888	T8	062, 274, 422, 454, 752, 926, 964
T9	102, 484, 700, 712, 818, 874, 880, 936, 940, 962	T9	052, 298, 500, 506, 540, 596, 822, 854
T10	272, 492, 570, 586, 800, 912, 914	T10	346, 534, 592, 810, 846, 932, 950
T11	692, 890, 944, 950, 952	T11	288, 394, 410, 518, 544, 872, 886
T12	284, 498, 656, 726, 938	T12	138, 296, 334, 466, 662, 724, 792, 956

LUMBAR VERTEBRAL LEVELS

	LEFT		RIGHT
L1	126, 580, 718, 722, 734, 816	L1	278, 428, 552, 694, 862, 870
L2	270, 396, 412, 450, 456, 536, 558, 648, 784, 896, 968, 976	L2	396, 406, 522, 738, 748, 790, 900, 906
L3	060, 304, 390, 394, 502, 508, 574, 584, 920, 922, 928	L3	112, 114, 306, 370, 380, 432, 504, 690, 904
L4	118, 282, 458, 470, 706, 730, 782, 812, 876	L4	124, 292, 488, 560, 702, 710,798, 828, 850, 908, 958
L5	350, 476, 478, 480, 826, 856, 930	L5	120, 294, 418, 468, 728, 744, 786, 824, 836

CRANIAL BONE-MUSCLE RELATIONSHIPS

CRANIAL BONE	MUSCLE NUMBER
A-P Rockez	722, 862
Ethmoid	284, 292, 422, 538, 544, 572, 580, 582, 614, 800, 886, 920, 946, 954
Frontal	102, 296, 428, 462, 492, 534, 564, 574, 808, 810, 854, 878, 880, 896, 898, 926
Glabella	276, 290, 406, 454, 558, 726, 816, 818, 948
Inferior Conchae	288, 430, 562, 584, 586, 796, 848, 858, 902, 950
Lacrimal	120, 130, 298, 470, 552, 746, 836, 924, 970, 976
Lateral Rocker	062, 122, 282, 392, 840, 860
Mandible	060, 114, 138, 334, 420, 734, 850, 904, 938, 944, 956
Maxillary	272, 404, 434, 442, 468, 496, 498, 530, 578, 648, 656, 662, 698, 706, 712, 728, 738, 742, 780, 788, 798, 842
Nasal	424, 448
Occipital	270, 346, 432, 528, 540, 590, 592, 692, 710, 744, 826, 846, 872, 874, 914, 934, 958
Palatine	126, 440, 466, 476, 560, 732, 736, 740, 852, 906, 930
Parietal	098, 110, 140, 278, 392, 402, 460, 500, 526, 536, 542, 550, 588, 596, 694, 718, 790, 792, 830, 834, 882, 888, 890
Rotation Rocker	124, 326, 724, 784, 794
Sphenoid	100, 134, 302, 390, 394, 416, 426, 486, 488, 490, 494, 506, 514, 568, 576, 612, 702, 832, 844, 856, 884
Styloid	294, 444, 466, 474, 502, 504, 510, 814, 820, 942, 962
Temporal	132, 300, 306, 314, 322, 370, 394, 396, 398, 410, 438, 450, 464, 478, 480, 482, 484, 508, 512, 516, 518, 520, 554, 700, 714, 782, 786, 804, 806, 812, 828, 838, 870, 892, 894, 964, 972
T.M.J.	936
Vomer	112, 118, 400, 446, 524, 532, 556, 594, 642, 690, 730, 822, 900, 966
Zygoma	274, 286, 304, 380, 396, 412, 414, 418, 452, 458, 472, 522, 546, 548, 566, 570, 704, 708, 824, 864, 876

FOOT BONE-MUSCLE RELATIONSHIPS

FOOT BONE	MUSCLE NUMBER
Calcaneus	270, 346, 432, 528, 540, 590, 592, 692, 710, 744, 826, 846, 872, 874, 914, 934, 958
Cuboid	132, 300, 306, 314, 322, 370, 390, 394, 398, 410, 438, 450, 464, 478, 480, 482, 484, 508, 512, 516, 518, 520, 554, 700, 714, 782, 786, 804, 806, 812, 828, 838, 870, 892, 894, 964, 972
Navicular	102, 296, 428, 462, 492, 534, 564, 574, 808, 810, 854, 878, 880, 896, 898, 926
Talus	098, 110, 140, 278, 392, 402, 408, 460, 500, 526,536, 542, 550, 588, 596, 694, 718, 790, 792, 830, 834, 882, 888, 890, 910
1st Cuneiform	284, 292, 422, 544, 572, 580, 582, 614, 696, 800, 886, 920, 946, 954
2nd Cuneiform	824, 864, 876
3rd Cuneiform	100, 134, 274, 286, 302, 304, 380, 396, 406, 412, 414, 416, 418, 426, 452, 454, 458, 468, 472, 490, 494, 506, 522, 546, 570, 576, 578, 612, 702, 704, 708, 742, 832, 844, 856, 884, 928, 948
1st Metatarsal	126, 440, 476, 538, 560, 732, 740, 852, 906, 930
2nd Metatarsal	112, 118, 298, 400, 446, 524, 532, 556, 594, 642, 690, 730, 822, 842, 900, 912, 966
3rd Metatarsal	272, 404, 436, 442, 452, 486, 488, 514, 530, 566, 568, 656, 662, 726, 728, 738, 780, 788, 798, 908
4th Metatarsal	274, 276, 286, 290, 548, 558, 812, 818
5th Metatarsal	434, 496, 498, 648, 698, 706, 712, 922
Proximal Phalanx - Great Toe	060, 114, 138, 334, 420, 734, 850, 904, 936, 938, 944, 956
Proximal Phlanx - 2nd Toe	120, 130, 288, 298, 430, 470, 552, 562, 746, 836, 848, 858, 902, 924, 950, 970, 976
Distal Phalanx - Great Toe	294, 424, 444, 448, 466, 474, 502, 504, 510, 814, 820, 942, 962
Proximal Phalanx- 4th Toe	584, 586
Distal Phalanx - 4th Toe	796

MUSCLE-ORGAN RELATIONSHIPS

052 Occipitalis
Gallbladder Duct System
Thyroid

058 Levator Palpebrae Superioris
Colon (Transverse)
Penis/Vaginal Vault

060 Orbicularis Occuli Upper Div.
Ear (Internal)
Thyroid

062 Orbicularis Occuli Lower Div.
Thymus
Pancreatic Duct System

070 Depressor Septi Nasi
Ductus Deferens
Parathyroid

098 Orbicularis Oris Upper Div.
Gallbladder
Liver

100 Orbicularis Oris Lower Div.
Anterior Pituitary
Gonads

102 Buccinator
Colon (Transverse)
Gonads

110 Temporalis Parietal Div.
Pancreas
Pharynx

112 Temporalis Occipital Div.
Pineal
Pancreatic Duct System

114 Masseter Superficial Div.
Adrenal
Lungs

118 Masseter Deep Div.
Posterior Pituitary
Thyroid

120 Pterygoideus Medialis, Sphenoid Div.
Thyroid
Posterior Pituitary

122 Pterygoideus Medialis, Palatine Div.
Thymus
Tonsils

124 Pterygoideus Lateralis, Upper Div. Disc
Pineal
Gonads

126 Pterygoideus Lateratis, Lower Div.
Gonads
Parathyroid

130 Rectus Superior Bulbi
Kidney
Stomach (Special Cells)

132 Rectus Inferior Bulbi
Lymphatics of Gallbladder
Stomach (Special Cells)

134 Rectus Medialis Bulbi
Gallbladder Duct System
Liver

136 Rectus Lateralis Bulbi
Pancreas
Urethra (Membranous)

138 Obliqluus Superior Bulbi
Liver
Lymphatics of Gallbladder Duct System

140 Obliquus Inferior Bulbi
Liver
Lymphatics of Jejunum

270 Upper Trapezius Scapular Div.
Colon
Eye

272 Upper Trapezius Clavicular Div.
Ear (Internal)
Thymus

274 Sternocleidomastoid Sternal Div.
Pancreas
Gallbladder

276 Sternocleidomastoid Clavicular Div.
Larynx
Lymphatics of Face and Neck

278 Scalenus Anterior
Bladder
Ductus Deferens

282 Scalenus Medius
Gallbladder
Lymphatics of Submandibular

284 Scalenus Posterior
Kidney
Urethra

286 Platysma Anterior Div.
Duodenum (Descending Portion)
Pancreas

288 Platysma Pneterior Div.
Rectum
Pancreatic Duct System

290 Digastricus Anterior Belly Div.
Pancreatic Duct System
Bladder

292 Digastricus Posterior Belly Div.
Gallbladder
Veins of Stomach

294 Stylohyoideus
Thyroid
Ureter

296 Mylohyoideus
Bladder
Tonsils

298 Geniohyoideus
Eye
Thyroid

300 Sternohyoideus
Gallbladder (Duct System)
Prostate/Uterus

302 Sternothyroideus
Adrenal
Kidney

304 Thyrohyoideus
Thymus
Nose

306 Omohyoideus
Eye
Spleen

308 Longus Colli Vertical Div.
Jejunum (Special Cells)
Gonads

314 Longus Capitis
Anterior Pituitary
Prostate/Uterus

322 Splenius Capitis Mastoid Div.
Pancreas
Anterior Pituitary

326 Splenius Cervicis
Adrenal
Heart

332 Semispinalis Capitis
Spleen
Penis/Vaginal Vault

334 Semispinalis Cervicis
Prostate/Uterus
Salivary Glands (Sublingual)

346 Obliquus Capitis Superior
Spleen
Lungs

350 Interspinalis Cervicis
Colon (Ascending/Descending)
Stomach (Fundus)

362 Cricoarytenoideus Lateralis
Pancreatic Duct System
Salivary Glands (Parotid)

370 Thyroarytenoideus
Prostate/Uterus
Pancreas

380 Constrictor Pharyngis Medius
Liver
Pharynx

390 Trapezius Middle Div.
Ear
Posterior Pituitary

392 Trapezius Lower Div.
Bladder
Kidney

394 Levator Scapula Superior Div.
Sinus (Frontal)
Spleen

396 Levator Scapula Inferior Div.
Parathyroid
Parotid Gland

398 Rhomboid Minor
Posterior Pituitary
Liver

400 Rhomboid Major
Liver
Mammary Tissue

402 Serratus Anterior Superior Div.
Lungs
Gonads

404 Serratus Anterior Inferior Div.
Lungs
Thymus

406 Pectoralis Minor Superior Div.
Heart
Lungs

408 Pectoralis Minor Inferior Div.
Kidney
Lungs

410 Subclavius Clavicular Div.
Ear (External)
Pancreatic Duct System

412 Subclavius Scapular Div.
Liver
Posterior Pituitary

414 Latissimus Dorsi Thoracic Div.
Lymphatics of Ileum
Pancreas

416 Latissimus Dorsi Lumbar Div.
Lymphatics of Duodenum
Salivary Glands (Parotid)

418 Latissimus Dorsi Iliac Div.
Colon (Transverse)
Urethra

420 Supraspinatus Spine Div.
Thymus
Sinus (Maxillary)

422 Supraspinatus Fosse Div.
Esophagus
Anterior Pituitary

424 Infraspinatus Superior Div.
Lymphatics of Lungs
Thyroid

426 Infraspinatus Middle Div.
Eye
Gallbladder

428 Infraspinatus Inferior Div.
Gallbladder Duct System
Thymus

430 Teres Minor
Thyroid
Gonads

432 Teres Major Superior Div.
Ear (External)
Pineal

434 Teres Major Inferior Div.
Lungs
Penis/Vaginal Vault

436 Subscapularis Superior Div.
Heart
Posterior Pituitary

438 Subscapularis Third Div.
Sinus (Sphenoid)
Thyroid

440 Subscapularis Second Div.
Esophagus
Heart

442 Subscapularis Inferior Div.
Prostate/Uterus
Pancreatic Duct System

444 Coracobrachialis Coracoid Div.
Kidney
Nose

446 Coracobrachialis Septal Div.
Bladder
Lungs

448 Deltoideus Posterior Medial Div.
Spleen
Tonsils

450 Deltoideus Posterior Lateral Div.
Colon (Ascending/Descending)
Eye

452 Deltoideus Middle Posterior Div.
Lungs
Spleen

454 Deltoideus Middle Anterior Div.
Gallbladder
Lungs

456 Deltoideus Anterior Scapular Div.
Lungs
Adrenal

458 Deltoideus Anterior Clavicular Div.
Lungs
Stomach (Special Cells)

460 Pectoralis Major Clavicular Div.
Heart
Prostate/Uterus

462 Pectoralis Major Sternal Div.
Liver
Mammary Tissue

464 Pectoralis Major Costal Div.
Penis/Vaginal Vault
Anterior Pituitary

466 Biceps Brachii Longhead
Kidney
Spleen

468 Biceps Brachii Shorthead
Colon (Sigmoid)
Gonads

470 Triceps Longhead
Duodenum (Superior Portion)
Eustachian Tube

472 Triceps Lateral Head
Gallbladder
Salivary Glands (Sublingual)

474 Triceps Medial Head
Thyroid
Prostate/Uterus

476 Articularis Cubiti
Bladder
Salivary Glands (Parotid)

478 Brachiatis
Jejunum
Tonsils

480 Brachioradialis Humeral Div.
Ileum (Special Cells)
Gonads

482 Brachioradialis Septal Div.
Kidney
Lungs

484 Pronator Teres Humeral Div.
Adrenal
Penis/Vaginal Vault

486 Pronator Teres Ulnar Div.
Kidney
Posterior Pituitary

488 Anconeus Olecranon Div.
Bladder
Heart

490 Anconeus Ulnar Div.
Lymphatics of Gallbladder
Pancreatic Duct System

492 Supinator Radial Div.
Ear
Gonads

494 Supinator Ulnar Div.
Liver
Prostate/Uterus

496 Pronator Quadratus Proximal Div.
Eustachian Tube
Stomach (Fundus)

498 Pronator Quadratus Distal Div.
Kidney
Sinus (Maxillary)

500 Palmaris Longus
Kidney
Lymphatics of Throat

502 Flexor Carpi Radialis Abd. Div.
Esophagus
Gallbladder

504 Flexor Carpi Radialis Flexor Div.
Adrenal
Thyroid

506 Flexor Carpi Ulnaris Flexor Div.
Ductus Deferens
Ileum

508 Flexor Carpi Ulnaris Add. Div.
Prostate/Uterus
Nose

510 Extensor Carpi Ulnaris Add. Div.
Colon (Ascending/Descending)
Stomach (Pyloric Vestibule)

512 Extensor Carpi Ulnaris Extensor Div.
Kidney
Prostate/Uterus

514 Extensor Carpi Radialis Brevis
Duodenum (Special Cells)
Nose

516 Extensor Carpi Radialis Long. Ext. Div.
Kidney
Stomach (Pyloric Antrum)

518 Extensor Carpi Radialis Long. Abd. Div.
Liver
Pancreatic Duct System

520 Extensor Pollicis Longus Ulnar Div.
Gallbladder Duct System
Anterior Pituitary

522 Extensor Pollicis Longus Sept. Div.
Lymphatics of Thoracic Duct
Epididymis

524 Extensor Pollicis Brevis Radial Div.
Gallbladder Duct System
Liver

526 Extensor Pollicis Brevis Sept. Div.
Adenoids
Pancreatic Duct System

528 Flexor Pollicis Longus
Pancreatic Duct System
Stomach (Special Cells)

530 Abductor Pollicis Longus Ulnar Div.
Lymphatics of Face and Neck
Nose

532 Abductor Pollicis Longus Radial Div.
Pancreas
Seminal Vesicle

534 Flexor Pollicis Brevis
Adrenal (Cortex)
Adrenal (Medulla)

536 Interossei Pollicis (Palmaris First)
Bladder
Sinus

538 Opponens Pollicis Flexor Div.
Posterior Pituitary
Gonads

540 Opponens Pollicis Abductor Div.
Pharynx
Pineal

542 Abductor Pollicis Brevis
Pancreas
Gallbladder Duct System

544 Adductor Pollicis Transversus
Ileum
Heart

546 Adductor Pollicis Obliquus
Anterior Pituitary
Lymphatics of Colon

548 Extensor Digit. Communis Manus Med. Div.
Ductus Deferens
Pharynx

550 Extensor Digit. Communis Manus Lat. Div.
Pancreas
Spleen

552 Extensor Digiti Minimi Manus
Lungs
Posterior Pituitary

554 Extensor Indicis Proprius
Kidney
Pancreus

556 Flexor Digit. Superficialis Med. Div.
Pancreas
Lyden Gland

558 Flexor Digit. Superficialis Lat. Div.
Anterior Pituitary
Tonsils

560 Flexor Digit. Profundus Manus Med. Div.
Bladder
Spleen

562 Flexor Digit. Profundus Manus Lat. Div.
Jejunum
Liver

564 Interossei Dorsales Manus Fourth
Heart
Thymus

566 Interossei Dorsales Manus Third
Pancreatic Duct System
Esophagus

568 Interossei Dorsales Manus Second
Sinus (Frontal)
Spleen

570 Interossei Dorsales Manus First
Anterior Pituitary
Bladder

572 Lumbricales Manus Fourth
Nose
Lymphatics of Colon

574 Lumbricales Manus Third
Lymphatics of Rectal Area
Parathyroid

576 Lumbricales Manus Second
Parathyroid
Seminal Vesicles

578 Lumbricales Manus First
Liver
Posterior Pituitary

580 Flexor Digiti Minimi Brevis Manus
Pancreas
Lymphatics of Gallbladder Duct System

582 Abductor Digiti Minimi Manus Flex. Div.
Lymphatics of Transverse Colon
Adrenals

584 Abductor Digiti Minimi Manus Abd. Div.
Ileum (Special Cells)
Lungs

586 Opponens Digiti Minimi Manus
Jejunum
Sinus (Maxillary)

588 Opponens Digiti Minimi Manus Flex. Div.
Pancreas (Protein)
Prostate

590 Interossei Palmares Fourth
Spleen
Larynx

592 Interossei Palmares Third
Pharynx
Gonads

594 Interossei Palmares Second
Ileum (Special Cells)
Salivary Glands (Sublingual)

596 Palmaris Brevis
Gallbladder
Salivary Glands (Sublingual)

610 Spinalis Thoracis Lumbar Div.
Bladder
Heart

612 Spinalis Thoracis Thoracic Div.
Heart
Pineal

614 Longissimus Thoracis Upp. Lumb. Div.
Adrenal
Mammary

618 Longissimus Thoracis Mid. Thor. Div.
Stomach (Body)
Pancreatic Duct System

642 Levatores Costarum Lower Div.
Colon (Sigmoid)
Gallbladder

648 Serratus Posterior Superior Div.
Bladder
Lymphatics of Lungs

652 Serratus Posterior Inferior Div.
Jejunum
Nose

656 Diaphram #1, Right Side Lumbar Div.
Heart, Lymphatics of Small
Intestine(Inguinal Lymph Nodes)

662 Diaphram #4, Left Side Lumbar Div.
Spleen
Pancreas (Inguinal Lymph Nodes)

690 Pyramidalis
Bladder
Nose

692 Obliquus Externus Abdominis Ant. Div.
Colon (Ascending/Descending)
Sinus (Frontal)

694 Obliquus Externus Abdominis Lat. Div.
Lymphatics of Colon
Sinus (Sphenoid)

696 Obliquus Internus Abdominis Ant. Div.
Colon (Hepatic and Splenic Flexure)
Eye

698 Obliquus Internus Abdominis Let. Div.
Tonsils
Prostate/Uterus

700 Rectus Abdominis First Div.
Adrenal
Colon (Ascending/Descending)

702 Rectus Abdominis Second Div.
Duodenum (Horizontal Portion)
Salivary Glands (Sublingual)

704 Rectus Abdominis Third Div.
Eye
Ileum

706 Rectus Abdominis Fourth Div. Medialis
Duodenum (Ascending Portion)
Esophagus

708 Rectus Abdominis Fourth Div. Medialis Lat.
Bladder
Penus/Vaginal Vault

710 Iliacus
Colon (Ascending/Descending)
Lymphatics of Jejunum

712 Iliacus Minor
Kidney
Pancreas

714 Transverse Abdominis Upper Div.
Salivary Glands (Submandibular)
Posterior Pituitary

718 Transverse Abdominis Lower Div.
Duodenum (Descending Portion)
Thymus

722 Psoas Major Lumbar Div.
Colon (Rectal Area)
Kidney

724 Psoas Major Thoracic Div.
Kidney
Mammary

726 Psoas Major Diaphragmatic Div.
Adrenal
Bladder

728 Psoas Minor
Lymphatics of Stomach
Posterior Pituitary

730 Quadratus Lumborum Costal Div.
Colon (Ascending/Descending)
Liver

732 Quadratus Lumborum Lumbar Div.
Gallbladder
Tonsils

734 Multifidus Lumbosacral Div.
Colon (Sigmoid)
Ductus Deferens

736 Iliocostalis Lumborum
Lungs
Stomach

738 Longissimus Lumborum
Eye
Jejunum

740 Coccygeus Sacral Div.
Ileum
Pancreatic Duct System

742 Coccygeus Coccyx Div.
Stomach (Pyloric Canal)
Thymus

744 Pubococcygeus
Heart
Lungs

746 Iliococcygeus
Thyroid
Prostate/Uterus

752 Cremaster Number 3
Spleen
Pancreatic Duct System

780 Gluteus Medius Posterior Div.
Gallbladder Duct System
Penis/Vaginal Vault

782 Gluteus Medius Middle Div.
Prostate/Uterus
Mammary Gland

784 Gluteus Medius Anterior Div.
Lungs
Gonads

786 Gluteus Minimus Anterior Div.
Pancreas
Lungs

788 Gluteus Minimus Posterior Div.
Pancreatic Duct System
Penis/Vaginal Vault

790 Tensor Fascia Lata Anterior Div.
Colon
Eustachian Tube

792 Tensor Fascia Lata Posterior Div.
Thyroid
Penis/Vaginal Vault

794 Rectus Femoris Reflected Head
Liver
Thyroid

796 Rectus Femoris Straight Head
Jejunum
Lymphatics of Ileum

798 Pectineus
Colon (Transverse)
Pancreatic Duct System

800 Adductor Brevis
Duodenum (L-Jejunum Junction; R-Ampulla of Vater), Eye

804 Adductor Longue Inferior Div.
Ileum
Penis/Vaginal Vault

806 Adductor Longus Superior Div.
Liver
Gonads

808 Gracilis
Adrenal
Prostate/Uterus

810 Sartorius
Adrenal
Lymphatics of Ileum

812 Obturator Externus
Heart
Spleen

814 Quadratus Femoris
Gonads
Nose

816 Vastus Medialis Upper Div.
Duodenum (Special Cells)
Lungs

818 Vastus Medialis Middle Div.
Adrenal
Gallbladder

820 Vastus Medialis Lower Div.
Ileum
Posterior Pituitary

822 Obturator Internus
Lungs
Larynx

824 Biceps Femoris Shorthead
Colon
Eustachian Tube

826 Biceps Femoris Longhead Fib. Div.
Colon (Ascending/Descending)
Spleen

828 Biceps Femoris Longhead Tib. Div.
Prostate/Uterus
Salivary Glands (Sublingual)

830 Vastus Lateralis Superior Div.
Thyroid
Thymus
832 Vastus Lateralis Middle Div.
Pancreatic Duct System
Salivary Glands (Submandibular)

834 Vastus Lateralis Lower Div.
Ileum
Pancreatic Duct System

836 Vastus Intermedius Medial Div.
Ileum
Salivary Glands (Parotid)

838 Vastus Intermedius Lateral Div.
Tonsils
Salivary Glands (Sublingual)

840 Articularis Genu
Adrenal
Gonads

842 Adductor Magnus Vertical Div.
Bladder
Prostate/Uterus

844 Adductor Magnus Oblique Div.
Anterior Pituitary
Broad Ligament

846 Adductor Magnus Transverse Div.
Nose
Lymphatics of Thyroid

848 Gluteus Maximus Iliac Div.
Pancreas
Pancreatic Duct System

850 Gluteus Maximus Sacral. Div.
Posterior Pituitary
Prostate/Uterus

852 Gluteus Maximus Coccygeal Div.
Bladder
Colon (Rectal Area)

854 Semitendinosis
Adrenal
Posterior Pituitary
856 Semimembranosis Tibial Div.
Adrenal
Lymphatics of Submandibular

858 Semimembranosis PopliteaL Div.
Ileum (Special Cells)
Pancreatic Duct System

860 Piriformis
Prostate/Uterus
Gonads

862 Gemellus Inferior
Lungs
Prostate/Uterus

864 Gemellus Superior
Epididymis
Heart

870 Popliteus
Gallbladder
Penis/Vaginal Vault

872 Gastrocnemius Medial Div.
Duodenum
Kidney

874 Gastrocnemius Lateral Div.
Colon (Ascending/Descending)
Liver

876 Plantaris
Jejunum
Lymphatics of Tonsils

878 Soleus Medial Div.
Adrenal
Anterior Pituitary

880 Soleus Lateral Div.
Colon (Rectal Area)
Liver

882 Tibialis Posterior Tibial Div.
Ileum
Pancreas
884 Tibialis Posterior Fibular Div.
Heart
Testicle/Ovaries

886 Peroneus Longus Cuneiform Div.
Bladder
Duodenum

888 Peroneus Longue Metatarsal Div.
Gallbladder
Parathyroid

890 Peroneus Brevis Fibular Div.
Lungs
Urethra (Membranous)

892 Peroneus Brevis Septal Div.
Bladder
Nose

894 Peroneus Tertius
Bladder
Lungs

896 Tibialis Anterior Supinator Div.
Jejunum
Urethra (Prostate Portion)

898 Tibialis Anterior Dorsifexor Div.
Ductus Deferens
Spleen

900 Flexor Hallucis Longus Tibial Div.
Liver
Anterior Pituitary

902 Flexor Hallucis Longus Fibular Div.
Esophagus
Kidney

904 Extensor Hallucis Longus Interos. Div.
Anterior Pituitary
Thymus

906 Extensor Hallucis Longus Fib. Div.
Heart
Urethra
908 Flexor Digitorum Longus Med. Div.
Anterior Pituitary
Stomach

910 Flexor Digitorum Longus Lat. Div.
Kidney
Anterior Pituitary

912 Extensor Digitorum Longus Med. Div.
Heart
Prostate/Uterus

914 Extensor Digitorum Longus Lat. Div.
Posteriar Pituitary
Thyroid

920 Adductor Hallucis Superior Div.
Prostate/Uterus
Anterior Pituitary

922 Adductor Hallucis Inferior Div.
Heart
Liver

924 Flexor Hallucis Brevis First Cune. Div.
Lymphatics of Stomach
Pineal

926 Flexor Hallucis Brevis Tendonal Div.
Tonsils
Pancreatic Duct System

928 Flexor Hallucis Brevis Third Cune. Div.
Lungs
Salivary Glands (Submandibular)

930 Flexor Hallucis Brevis Cuboid Div.
Jejunum
Lungs

932 Abductor Hallucis Obl. Head Peron. Div.
Palataine Adenoids
Stomach

934 Abductor Hallucis Obl. Head Meta. Div.
Lungs
Nose

936 Abductor Hallucis Trans. Head Med. Div.
Ileum
Testicle/Ovaries

938 Abductor Hallucis Trans. Head Lat. Div.
Colon (Rectal Area)
Lymphatics of Jejunum

940 Extensor Hallucis Brevis
Jejunum
Pancreatic Duct System

942 Quadratus Plantae Medial Div.
Stomach (Parietal Cells)
Salivary Gland (Sublingual)

944 Quadratus Plantae Lateral Div.
Larynx
Penis/Vaginal Vault

946 Flexor Digitorum Brevis Medial Div.
Ductus Deferens
Larynx

948 Flexor Digitorum Brevis Lateral Div.
Colon (Ascending/Descendlng)
Salivary Glands (Sublingual)

950 Flexor Digitus Pedis Second
Lymphatics of Ileum
Sinus (Maxillary)

952 Flexor Digitus Pedis Third
Ear (External)
Kidney

954 Flexor Digitus Pedis, Fourth
Thymus
Penis/Vaginal Vault

956 Flexor Digitus Pedis, Fifth
Liver
Sinus (Maxillary)

958 Adductor Digitus Pedis Second
Eye
Pancreatic Duct System

960 Adductor Digitus Pedis Third
Bladder
Spleen

962 Adductor Digitus Pedis Fourth
Eye
Salivary Glands (Submandibular]

964 Adductor Digitus Pedis Fifth
Sinus (Nasal)
Tonsils

966 Abductor Digitus Pedis Second
Thymus
Spleen

968 Abductor Digitus Pedis Third
Adrenal
Ureter

970 Abductor Digitus Pedis Fourth
Prostate/Uterus
Thyroid

972 Abductor Digitus Pedis Fifth
Nose
Lungs

974 Abductor Digiti Minimi Pedis
Posterior Pituitary
Nose

976 Extensor Digitorum Brevis
Thymus
Tonsils

ALPHABETICAL INDEX OF MUSCLES

MUSCLE NAME	MUSCLE #	VOLUME	PAGE
Abductor Digiti Minimi Manus Abductor Div.	584	IV	289
Abductor Digiti Minimi Manus Flexor Div.	582	IV	287
Abductor Digitus Minimi Pedis	974	V	141
Abductor Digitus Pedis Fourth	970	V	137
Abductor Digitus Pedis Fifth	972	V	138
Abductor Digitus Pedis Second	966	V	132
Abductor Digitus Pedis Third	968	V	134
Abductor Hallucis Oblique Head Metatarsal Div.	934	V	98
Abductor Hallucis Oblique Head Peroneus Div.	932	V	96
Abductor Hallucis Transverse Head Lateral Div.	938	V	102
Abductor Hallucis Transverse Head Medial Div.	936	V	100
Abductor Pollicis Brevis	542	IV	241
Abductor Pollicis Longus Radial Div.	532	IV	231
Abductor Pollicis Longus Ulnar Div.	530	IV	229
Adductor Brevis	800R	II	59
Adductor Brevis	800L	II	61
Adductor Digitus Pedis Fifth	964	V	130
Adductor Digitus Pedis Fourth	962	V	128
Adductor Digitus Pedis Second	958	V	124
Adductor Digitus Pedis Third	960	V	126
Adductor Hallucis Inferior Div.	922	V	86
Adductor Hallucis Superior Div.	920	V	84
Adductor Longus Inferior Div.	804	II	63
Adductor Longus Superior Div.	806	II	65
Adductor Magnus Oblique Div.	844	II	103
Adductor Magnus Transverse Div.	846	II	105
Adductor Magnus Vertical Div.	842	II	101
Adductor Pollicis Obliquus	546	IV	245
Adductor Pollicis Transversus	544	IV	243
Anconeus Olecranon Div.	488	IV	171
Anconeus Ulnar Div.	490	IV	173
Articularis Cubiti	476	IV	157
Articularis Genu	840	II	109
Biceps Brachii Longhead	466	IV	149
Biceps Brachii Shorthead	468	IV	151
Biceps Femoris Longhead Fibular Div.	826	II	85
Biceps Femoris Longhead Tibial Div.	828	II	87
Biceps Femoris Shorthead	824	II	83
Brachialis	478	IV	161

Brachioradialis Humeral Div.	480	IV	163
Brachioradialis Septal Div.	482	IV	165
Buccinator	102	III	39
Coccygeus Coccyx Div.	742	II	33
Coccygeus Sacral Div.	740	II	31
Coracobrachialis Coracoid Div.	444	IV	119
Coracobrachialis Septal Div.	446	IV	121
Deltoideus Anterior Clavicular Div.	458	IV	133
Deltoideus Anterior Scapular Div.	456	IV	131
Deltoideus Middle Anterior Div.	454	IV	129
Deltoideus Middle Posterior Div.	452	IV	127
Deltoideus Posterior Lateral Div.	450	IV	125
Deltoideus Posterior Medial Div.	448	IV	123
Digastricus Anterior Belly	290	III	75
Digastricus Posterior Belly	292	III	77
Extensor Carpi Radialis Brevis	514	IV	205
Extensor Carpi Radialis Longus Abductor Div.	518	IV	209
Extensor Carpi Radialis Longus Extensor Div.	516	IV	207
Extensor Carpi Ulnaris Adductor Div.	510	IV	201
Extensor Carpi Ulnaris Extensor Div.	512	IV	203
Extensor Digiti Minimi Manus	552	IV	257
Extensor Digitorum Brevis	976	V	143
Extensor Digitorum Communis Manus Lateral Div.	550	IV	255
Extensor Digitorum Communis Manus Medial Div.	548	IV	253
Extensor Digitorum Longus Lateral Divisor.	914	V	77
Extensor Digitorum Longus Medial Div.	912	V	75
Extensor Hallucis Brevis	940	V	105
Extensor Hallucis Longus Fibular Div.	906	V	67
Extensor Hallucis Longus Interosseous Div.	904	V	65
Extensor Indicis Proprius	554	IV	259
Extensor Pollicis Brevis Radial Div.	524	IV	227
Extensor Pollicis Brevis Septal Div.	526	IV	225
Extensor Pollicus Longus Septal Div.	522	IV	221
Extensor Pollicis Longus Ulnar Div.	520	IV	219
Flexor Carpi Radialis Abductor Div.	502	IV	193
Flexor Carpi Radialis Flexor Div.	504	IV	195
Flexor Carpi Ulnaris Adductor Div.	508	IV	199
Flexor Carpi Ulnaris Flexor Div.	506	IV	197
Flexor Digiti Minimi Brevis Manus	580	IV	285
Flexor Digitorum Brevis Lateral Div.	948	V	115
Flexor Digitorum Brevis Medial Div.	946	V	113
Flexor Digitorum Longus Lateral Div.	910	V	73
Flexor Digitorum Longus Medial Div.	908	V	71
Flexor Digitorum Profundus Manus Lateral Div.	562	IV	267

Flexor Digitorum Profundus Manus Medial Div.	560	IV	265
Flexor Digitorum Superficialis Lateral Div.	558	IV	263
Flexor Digitorum Superficialis Medial Div.	556	IV	261
Flexor Digitus Pedis Second	950	V	117
Flexor Digitus Pedis Third	952	V	119
Flexor Digitus Pedis, Fifth	956	V	123
Flexor Digitus Pedis, Fourth	954	V	121
Flexor Hallucis Brevis Cuboid Div.	930	V	95
Flexor Hallucis Brevis Tendonal Div.	926	V	91
Flexor Hallucis Brevis Third Cuneiform Div.	928	V	93
Flexor Hallucis Brevis First Cuneiform Div.	924	V	89
Flexor Hallucis Longus Fibular Div.	902	V	63
Flexor Hallucis Longus Tibial Div.	900	V	61
Flexor Pollicis Brevis	534	IV	233
Flexor Pollicis Longus	528	IV	227
Gastrocnemius Lateral Div.	874	V	31
Gastrocnemius Medial Div.	872	V	29
Gemellus Inferior	862	II	121
Gemellus Superior	864	II	123
Geniohyoid	298	III	82
Gluteus Maximus Coccygeal Div.	852	II	111
Gluteus Maximus Iliac Div.	848	II	107
Gluteus Maximus Sacral Div.	850	II	109
Gluteus Medius Anterior Div.	784	II	43
Gluteus Medius Middle Div.	782	II	41
Gluteus Medius Posterior Div .	780	II	39
Gluteus Minimus Anterior Div.	786	II	45
Gluteus Minimus Posterior Div.	788	II	47
Gracilis	808	II	67
Iliacus	710	I	45
Iliacus Minor	712	I	47
Iliococcygeus	746	II	37
Iliocostalis Lumborum	736	I	67
Infraspinatus Inferior Div.	428	IV	103
Infraspinatus Middle Div.	426	IV	101
Infraspinatus Superior Div.	424	IV	99
Interossei Dorsales Manus First	570	IV	275
Interossei Dorsales Manus Second	568	IV	273
Interossei Dorsales Manus Third	566	IV	271
Interossei Dorsales Manus Fourth	564	IV	269
Interossei Palmares Fourth	590	IV	295
Interossei Palmares Second	594	IV	299
Interossei Palmares Third	592	IV	297
Interossei Pollicis (Palmaris First)	536	IV	234

Latissimus Dorsi Iliac Div.	418	IV	93
Latissimus Dorsi Lumbar Div.	416	IV	91
Latissimus Dorsi Thoracic Div.	414	IV	89
Levator Scapula Inferior Div.	396	IV	65
Levator Scapula Superior Div.	394	IV	63
Longissimus Lumborum	738	I	69
Longus Capitis	314	III	93
Lumbricales Manus First	578	IV	282
Lumbricales Manus Fourth	572	IV	276
Lumbricales Manus Second	576	IV	280
Lumbricales Manus Third	574	IV	278
Masseter Deep Div.	118	III	47
Masseter Superficial Div.	114	III	45
Multifidus Lumbosacral Div.	734	I	65
Mylohyoideus	296	III	81
Obliquus Externus Abdominis Anterior Div.	692	I	27
Obliquus Externus Abdominis Lateral Div.	694	I	29
Obliquus Internus Abdominis Anterior Div.	696	I	31
Obliquus Internus Abdominis Lateral Div.	698	I	33
Obturator Externus	812	II	71
Obturator Internus	822	II	81
Omohyoid	306	IV	79
Opponens Digiti Minimi Manus Abductor Div.	586	IV	291
Opponens Digiti Minimi Manus Flexor Div.	588	IV	293
Opponens Pollicis Abductor Div.	540	IV	239
Opponens Pollicis Flexor Div.	538	IV	237
Orbicularis Oris Inferior	100	III	37
Orbicularis Oris Upper Div.	098	III	35
Palmaris Brevis	596	IV	301
Palmaris Longus	500	IV	191
Pectineus	798	II	57
Pectoralis Major Clavicular Div.	460	IV	245
Pectoralis Major Costal Div.	464	IV	249
Pectoralis Major Sternal Div.	462	IV	247
Pectoralis Minor Inferior Div.	408	IV	77
Pectoralis Minor Superior Div.	406	IV	75
Peroneus Brevis Fibular Div.	890	V	49
Peroneus Brevis Septal Div.	892	V	51
Peroneus Longus Cuneiform Div.	886	V	45
Peroneus Longus Metatarsal Div.	888	V	47
Peroneus Tertius	894	V	53
Piriformis	860	II	119
Plantaris	876	V	35
Platysma Anterior Div.	286	IV	83

Platysma Posterior Div.	288	IV	81
Popliteus	870	V	29
Pronator Quadratus Distal Div.	498	IV	181
Pronator Quadratus Proximal. Div.	496	IV	179
Pronator Teres Humeral Div.	484	IV	167
Pronator Teres Ulnar Div.	486	IV	169
Psoas Major Diaphragmatic Div.	726	I	57
Psoas Major Lumbar Div.	722	I	53
Psoas Major Thoracic Div.	724	I	55
Psoas Minor	728	I	59
Pterygoideus Lateralis (Ext.) Lower Div.	126	III	55
Pterygoideus Lateralis (Ext.) Upper Div.-Disc	124	III	53
Pterygoideus Medialis (Int.) Palatine Div.	122	III	51
Pterygoideus Medialis (Int.) Sphenoid Div.	120	III	49
Pubococcygeus	744	II	35
Pyramidalis	690	I	25
Quadratus Femoris	814	II	73
Quadratus Lumborum Costal Div.	730	I	61
Quadratus Lumborum Lumbar Div.	732	I	63
Quadratus Plantae Lateral Div.	944	V	111
Quadratus Plantae Medial Div.	942	V	109
Rectus Abdominis First Div.	700	I	35
Rectus Abdominis Fourth Div. Lateralis	708	I	43
Rectus Abdominis Fourth Div. Medialis	706	I	41
Rectus Abdominis Second Div.	702	I	37
Rectus Abdominis Third Div.	704	I	39
Rectus Femoris Reflected Head	794	II	53
Rectus Femoris Straight Head	796	II	55
Rhomboid Major	400	IV	169
Rhomboid Minor	398	IV	167
Sartorius	810	II	69
Scalenus Anterior	278	III	65
Scalenus Medius	282	III	67
Scalenus Posterior	284	III	69
Semimembranosis Popliteal Div.	858	II	117
Semimembranosis Tibial Div.	856	II	115
Semispinalis Capitis	332	III	95
Semitendinosis	854	II	113
Serratus Anterior Inferior Div.	404	IV	73
Serratus Anterior Superior Div.	402	IV	71
Soleus Lateral Div.	880	V	39
Soleus Medial Div.	878	V	37
Sternocleidomastoid Clavicular Div.	276	III	63
Sternocleidomastoid Sternal Div.	274	III	61

Sternohyoid	300	III	85
Sternothyroid	302	III	87
Stylohyoid	294	III	79
Subclavius Scapular Div.	412	IV	87
Subclavius Clavicular Div.	410	IV	85
Subscapularis Inferior Div.	442	IV	117
Subscapularis Second Div.	440	IV	119
Subscapularis Superior Div.	436	IV	111
Subscapularis Third Div.	438	IV	123
Supinator Radial Div.	492	IV	175
Supinator Ulnar Div.	494	IV	177
Supraspinatus Fossa Div.	422	IV	97
Supraspinatus Spine Div.	420	IV	95
Temporalis Parietal Div.	110	III	41
Temporalis Occipital Div.	112	III	43
Tensor Fascia Lata	790	II	49
Tensor Fascia Lata Posterior Div.	792	II	51
Teres Major Inferior Div.	434	IV	109
Teres Major Superior Div.	432	IV	107
Teres Minor	430	IV	105
Thyrohyoid	304	III	89
Tibialis Anterior Dorsiflexor Div.	898	V	57
Tibialis Anterior Supinator Div.	896	V	55
Tibialis Posterior Fibular Div.	884	V	43
Tibialis Posterior Tibial Div.	882	V	41
Transverse Abdominis Lower Div.	718	I	51
Transverse Abdominis Upper Div.	714	I	49
Trapezius Lower Div.	392	IV	61
Trapezius Middle Div.	390	IV	59
Triceps Lateral. Head	472	IV	155
Triceps Longhead	470	IV	153
Triceps Medial Head	474	IV	157
Upper Trapezius Clavicular Div.	272	IV	57
Upper Trapezius Scapular Div.	270	IV	55
Vastus Intermedius Lateral Div.	838	II	97
Vastus Intermedius Medial Div.	836	II	95
Vastus Lateralis Lower Div.	834	II	93
Vastus Lateralis Middle Div.	832	II	91
Vastus Lateralis Superior Div.	830	II	89
Vastus Medialis Lower Div.	820	II	79
Vastus Medialis Middle Div.	818	II	77
Vastus Medialis Upper Div.	816	II	75

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GLOSSARY of ABBREVIATIONS

Ant	Anterior
ASIS	Anterior superior iliac spine of ilium
BL	Bilateral
Contralateral	Pertains to opposite side of the body (R or L) from reference
CN	Cranial Nerve
EAC	External Auditory Canal
EOP	External occipital protuberance
I.C.S.	Intercostal space
Ipsilateral	Pertains to same side of the body (R or L) as reference
L	Left or Lumbar
Lat	Lateral
L.B.	Lovett Brother
M.A.P.	Muscle acupuncture point
Midline	Midline of the body or organ
M.M.	Myomere, direct nerve supply to muscle
M.T.P.	Muscle Testing position
Post	Posterior
PSIS	Posterior superior iliac spine of ilium
Sup	Superior
R	Right
SCM	Sternocleidomastoideous muscle
V.L.	Vertebral Level, A level of the spinal column where the somato-visceral relationships are expressed
VOR	Visceral Organ Reflexes

MERIDIANS

B	Bladder
Cv	Conception Vessel
Cx	Circulation / Sex
G	Gallbladder
H	Heart
K	Kidney
Li	Large Intestine
Lu	Lung
Lv	Liver
P	Pericardium (same as Circulation Meridian)
Si	Small Intestine
Sp	Spleen
St	Stomach
Tw	Triple Warmer
X	Extra (outside of normal Meridians)
Gv	Governing Vessel

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